

# WiSACWIS

*Interface User Guide*

**Thursday, May 16, 2002**

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## 1.0 Introduction

The purpose of this document is to provide the Department of Health and Family Services (DHFS) and the Counties of Wisconsin with a users guide and training tool for developing the interface between the Wisconsin State Automated Child Welfare Information System (WiSACWIS) and applicable County system(s).

Many of the decisions and planning for interfaces have occurred through a Workgroup with County representatives from selected Counties, the DHFS State team and American Management Systems (AMS). There were three workgroups. The Financial Workgroup dealt with the financial interfaces and related payment and accounting data exchange. The Case Management Workgroup dealt with the case related data exchange. The Common Intake Agent Workgroup dealt with a common intake interface design, and is covered in topic paper *IN05 Common Intake Agent (CIA)*. The CIA topic is considered separate from this interface document because of different timeframe and technology.

From these workgroups the Financial and Case Management interface designs were formalized and approved in a *Technical Strategy for County Case Management and Financial Interfaces*. AMS will develop the WiSACWIS update/extract interfaces based on these designs. Once completed and approved by the State, these interfaces will be considered final, and each County will be expected to develop the County system side of these interfaces with the ability to interact with the WiSACWIS side of these interfaces as developed by AMS.

The technology for this interface will be through the use of an extract Oracle Lite database that will provide a County with their specific data. Details of this are discussed in the technology section of this document. They will use this database to update their existing systems for check processing and reporting purposes. This database also provides the Counties with a source to perform ad-hoc reporting.

Certain underlying philosophies or principles guide the interfacing processes.

- Identify early those systems that the County intends to continue to use in conjunction with WiSACWIS that are necessary to maintain existing business processes.
- Provide the County with appropriate information and consulting so that the County can use the WiSACWIS data for updating their existing database(s) and for ad-hoc reporting.
- Uncover and resolve interface issues in a timely manner. Interface-related issue tracking and resolution will be integrated into the project-wide issue tracking and resolution system.

The Technical Strategy for county Case Management and Financial Interfaces contain a discussion of the following areas:

- Overview of Case Management and Financial Interfaces;

- A technology that section discusses the technical facility by which the data will be exchanged between WiSACWIS and the County;
- An overview of the data dictionary, and how this can be used as a tool for the County in understanding the WiSACWIS extract database and how it will map to the County's existing systems; and
- A detailed list of WiSACWIS and County Workgroup participant contacts that may be used by the County when seeking assistance with the interface development

In this document the following sections discuss:

- *2.0 Case Management Interface* – This section discusses the ten core subject areas of case management in WiSACWIS.
- *3.0 Financial Interface* – This section discusses the financial interface processing

## 2.0 Case Management Interface

This section deals with the Case Management tables in WiSACWIS. Though a single interface is being used to transmit data to the County, the tables can be divided into two categories: Case Management and Financial.

To help understand Case Management in WiSACWIS consists of tables have been categorized into ten core subject areas.

- CPS Intake
- Services Intake
- Case
- Case Participant
- Provider
- Placement
- Assessment
- Legal

These core subject areas will each be described in three parts. The first part will be a brief high level description of this area. The second part will include a data model of the relationships within this area. The third part will list the tables included in this area. The data models presented in this section are as of the date on the cover of this document.

The Data Dictionary contains the most current information. The current data models and the details of each field element can be retrieved from the Data Dictionary. Also, from the Data Dictionary can be generated a data mapping report, which is useful for performing mapping with a County's existing system(s) (See Appendix A). The Data Dictionary is discussed in further detail in the *Interface Strategy for County Case Management and Financial Interfaces*.

Included in the interface extract database file to the County will be only the County's data. County data is determined as follows.

- Case Data is any work in a case that is assigned to a worker from that County
- Intake Data is all the data associated with an intake that is done in the County, and any intake that originated in another County but results in a Case that is deemed Case Data (per the above criteria) of that County.
- Provider Data is any provider work where the provider provides services for that County. Services are County specific.
- Worker Data is any worker assigned to that County.

- Person Data is any person who is either a Case Participant, Intake Participant, Home Provider Participant, or a Worker associated with the County based on criteria stated above.
- Reference Code Data is all general WiSACWIS reference code information plus any Reference Code Data identified specifically for the County.

Any tables not included in this section are considered periphery tables. The details of these tables are described in the Data Dictionary, and their relationship to the core tables is based on Case ID and Person ID or Provider Organization ID .

All the tables described in this section are also sorted by subject area in Appendix C.  
All the tables described in this section are also sorted by table and match subject area in Appendix D.

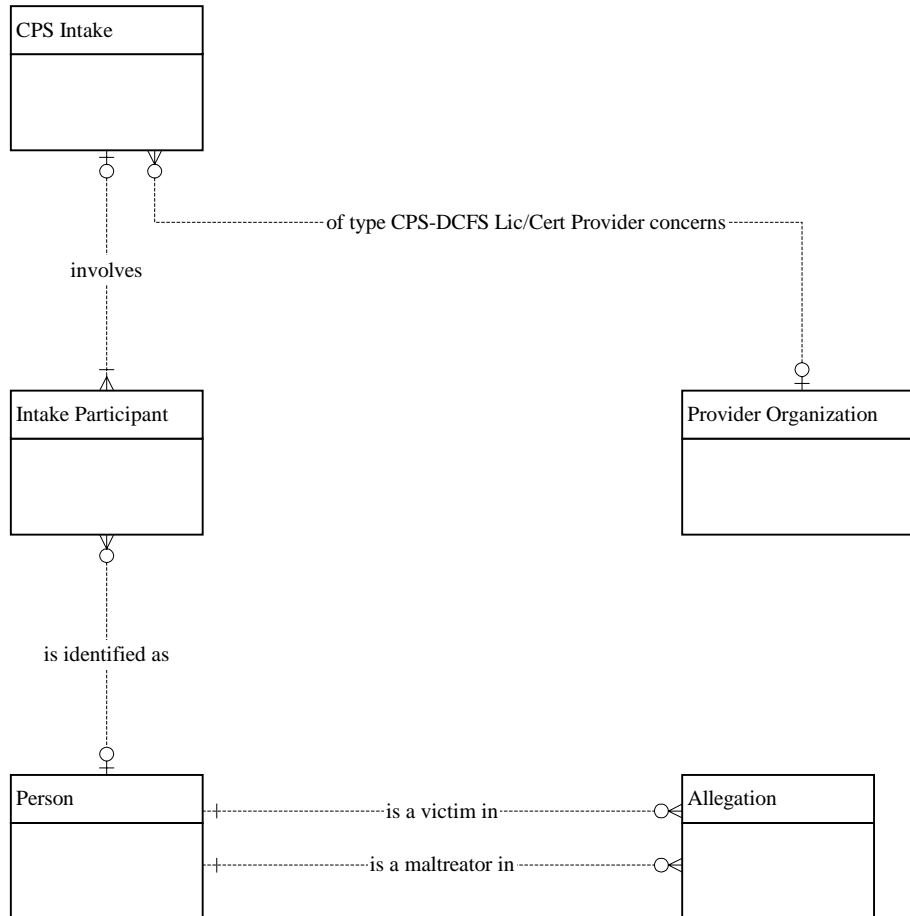
## 2.1 CPS Intake

The CPS intake consists of the windows that capture intake information. The *Protective Services Report* topic includes the Participant Identification Window, the Protective Services Report Window (containing the following five tabs: Participant Tab, Basic Tab, Allegations Tab, Decision Tab, and the Response Time Matrix Tab), the PS Report Narrative Window and the Report Window. In addition, the Roles Pop-Up Window and the Incident Information Pop-Up Window are included and will be described. The CPS intake is covered in further detail in topics paper *SM01a Protective Services Report*.

In the following data model the database structure is described for CPS intake. For every CPS intake there exists several Intake Participants. A Provider Organization may also be involved in a CPS intake if the type of intake is “CPS-DCFS License/Certified Provider.” Each Intake Participant will exist once in WiSACWIS as a Person. Each Person may have multiple allegations as a victim. Each Person may also have multiple allegations as a maltreater.

Data Model Description	Table Name
CPS Intake	CPS_REPORT
Intake Participant	INTAKE_PART
Person	PERSON
Provider Organization	PROVIDER_ORG
Allegation	ALLEGATION

## Child Protective Services Intake Data Model





## 2.2 Services Intake

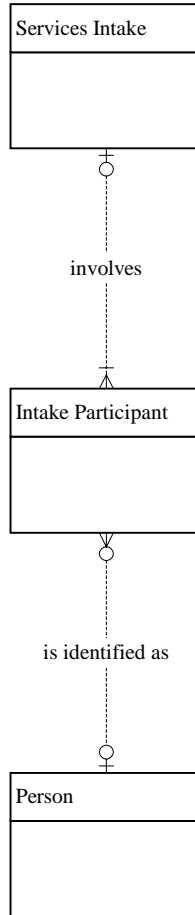
The *Services Intake* module includes windows and processing for the documentation of a request for services. This module will be used primarily by staff to document non-Protective Services referrals including Pro Se, Court Ordered Studies, ICPC, Kinship Care, Courtesy Interviews, and Intra-State Referral. The user conducts five activities when documenting a Services Intake:

- the gathering of information regarding the participants;
- the classification of the type of request and identification of contact information for the referral/intake;
- the decision (e.g., Screen In) of the referral/intake and reasons for that decision;
- the gathering of additional, detailed information, if needed, regarding the services requested; and
- linking the referral/intake to an existing case or creating a new case.

Each Services Intake involves multiple Intake Participants. Each Intake Participant is identified as a unique Person in WiSACWIS.

Data Model Description	Table Name
Services Intake	REFERRAL
Intake Participant	INTAKE_PART
Person	PERSON

## Services Intake Data Model



## 2.3 Case

The windows and processing defined in *Case* module support the following major functions:

- the opening of new cases for families;
- the viewing and maintenance of existing family cases;
- the linking and de-linking of an intake to an existing family case;
- the viewing and maintenance of case closure history (see *SM05: Case Closure*);
- the reopening of existing closed family cases;
- the creation of Case Participants and maintenance of Case Participant status (deactivation, reactivation, and removal);
- the maintenance of Case Participant information, including some AFCARS required values;
- the creation and removal of case collateral contacts;
- the creation and removal of other case contacts;
- the maintenance and update of Case and Case Participant address information; and
- the copying of a case record for a child whose parental rights have been terminated (a “TPRed” child) from an old case to a new case.

To support these functions *SM04a: Maintain Case* includes a main window with four tabs, six pop-up windows, a Search Case window, and two batch processes. Basic family case information is displayed on the Maintain Case window, which consists of four tabs: Participants, Address, Collaterals, and Closing History. The Closing History tab and other case closing functionality is described in *SM05: Case Closure*. The Maintain Case window gathers initial information from the major intake related tables, including CPS Report table, Referral table, Intake Participant table, and Person table. New information is saved to the Case, Case Participant, Case Participant Status, Address, Case Other Contact, Ticklers, and TPR Batch tables.

### 2.3.1 Defining a Case in WiSACWIS

A family case or one of its Participants is the focus of most County business processes. Workers and their supervisors measure workload through family cases. Workers may create treatment plans and provide services to families. Thus, a family case is the natural vehicle for defining a situation and packaging the activities that are planned and conducted to address the situation. The family cases that County handles vary in structure and size, so the WiSACWIS definition of a family case needs to be broad enough to encompass a variety of situations. However, WiSACWIS must also ensure that duplicate family cases are not created for a single situation and that individuals involved in multiple households or family cases are easily identifiable and traceable.

CPS cases in WiSACWIS fall into four broad groups of cases: Family, Individual, County Provider, and Other Provider. Family cases generally evolve from an in-home situation or from a Services Intake. Intake workers may document Protective Services (PS) Reports, (see *SM01a: Protective Services Reports*). Individual cases are created for a child who is TPRed, for a child who is adopted, or for a child who reaches age of majority. The group of CPS cases referred to as County Provider cases are created when

a PS Report involving an allegation against a foster care or other provider licensed by County is received and accepted for assessment. Cases involving Other Providers (e.g., a facility) also originate with a PS Report.

The majority of County cases are family-type cases. The focus of a family case is almost always some type of care taking constellation - a single parent household or a blended family, for example. As mentioned, however, a WiSACWIS family case may also involve an individual, such as an abandoned infant, a TPRed child, a subsidized adoption, or a youth whose goal is independent living and for whom no family case exists.

In WiSACWIS, family case creation requires the following: at least one active Case Participant and at least one related intake. All family cases in WiSACWIS originate with some type of intake, except:

- a TPRed child for whom a new case is created when termination severs the relationship with an existing County case, and
- a County Case Participant who is adopted and for whom a new case must be created so that adoption subsidy payments can be made.

In summary, the manners in which a case is created are:

- as a result of a Protective Services (PS) Report,
- as a result of a Services Intake,
- as a result of Termination of Parental Rights (TPR), and
- as a result of a subsidized adoption.

Creation of family cases occurs in what is known as create mode. In order to address unique features, the creation of Subsidized Adoption or TPR cases is discussed separately. The unique features of maintaining cases after creation, in maintain or update mode, is also discussed separately. All created or linked cases must first be saved before maintenance can be performed on them. Saved cases are retrieved from the Case Outliner by selecting a specific case and selecting the Maintain Case option from the right mouse button click.

### 2.3.2 Case Closure

The *SM05: Case Closure* topic accommodates closing processes for all types of cases in WiSACWIS. In order to provide context for case closure, it is helpful to understand the types of cases in WiSACWIS and how they are maintained. *SM04a: Maintain Case* discusses the types of cases managed in WiSACWIS – cases that are opened as the result of an intake, cases for a child or children whose parental rights have been terminated (TPR), and cases for adopted children that are used to pay subsidies. In addition to routine case closures, *SM05: Case Closure* addresses two special case closure situations:

- cases closing as a result of a subsidized adoption (reflected on an adoption decree),
- merging multiple cases into one case when a duplicate case is discovered.

Except for cases that are closed for reason of adoption, case closure can occur only when all services to all case participants are closed in WiSACWIS. However, if the only participant in a case is a TPR child and the child is being adopted, the case may be closed with an open episode for In Home Service. The adoptive child will be automatically

moved into a new case with a new Case ID and a new adoptive name. The child's records will be copied over to the new case along with the open placement record.

An adoption decree, as a record of a finalized adoption, reflects a reason for closing a case. Records on completed adoptions are recorded in *SM16: Close Adoption Record and Adoption Search*.

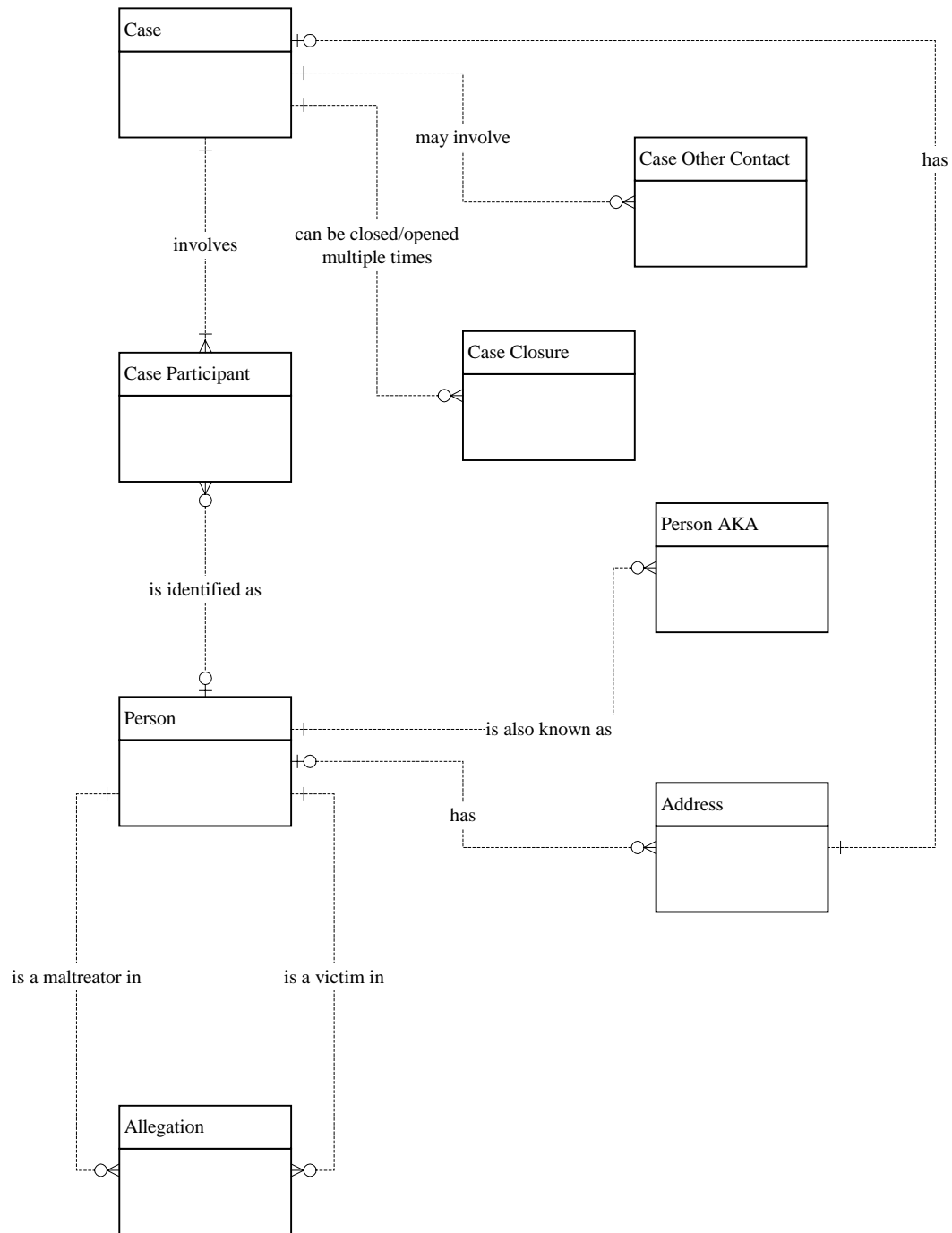
In addition to the case closure windows described in detail below, *SM05: Case Closure* incorporates three batch processes that:

- support the merging of two cases when duplicates are identified or after adoption (for sibling groups),
  - support the copying of critical eligibility and subsidy agreement records from a pre-adoption case into a newly created subsidized adoption case record, and
- check cases for which a closure request has been submitted to determine whether or not the closure should proceed.

In the following data model, each Case will have multiple Case Participants. Each Case Participant is identified as a unique Person. Each Person may be established as a maltreater or as a victim in an Allegation. Each Person may also have multiple AKA Person names. Each Person may have multiple Addresses. Each Case must have an Address. Each Case maybe closed and reopened multiple times. Each Case may involve multiple Other Case Contacts.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Person	PERSON
Person Aka	PERSON_AKA
Allegation	ALLEGATION
Address	ADDRESS
Case Closure	CASE_CLOSURE
Case Other Contract	CASE_OTHR_CNTCT

## Case Data Model



## 2.4 Case Participant

Each Case Participant may have Assets, Employment, Education, and Medical information recorded about them.

Each Case Participant may have Assets and Employment information recorded about them. The Asset/Employment window is used to view and update a case participant's assets, liabilities, financial benefits and employment information. It contains the following two tabs: the Assets/Liabilities Tab and Employment Tab. There are two pop-up windows associated with the main window. The Assets Pop-up window is used to create or change asset information records. The Employment Pop-up window is used to create or change employment records.

Each Case Participant may have an Education information recorded about them. The *Education SM07a* design topic supports the maintenance of client educational information throughout a client's history with DHFS. It allows workers to document and maintain an ongoing history of School Districts of Jurisdiction, notifications generated, and all schools that a child has attended throughout the history of his or her involvement with DHFS. The Education topic supports the collection of the following specific parts of a child's educational record:

- A history of the School Districts responsible for educational programming and for funding a child's education,
- Notifications generated and their recipients,
- Special Education Eligibility,
- Individualized Education Plan (IEP) existence, and
- A history of schools attended by the child.

Educational records can be viewed and updated by workers who are authorized to access a child's case. The most current educational information for a child is also displayed in summary form on the Education tab of the Case Participant window (see topic *SM13a: Case Participant Information*) for view-only purposes.

The Case Participant Information topic provides the functionality to view basic legal, medical, and educational information for a case participant and to view and update a participant's medical history. The topic covers two main windows: The Case Participant Information window and the Medical window.

The purpose of the Case Participant window is to provide an overview of participant information. This is information that a parent might instantly know about his or her child. It is a read-only tab folder that displays a summary of information entered on windows described in *SM07a: Education*, *SM09: Court*, and on the Medical window discussed in this topic. If no information exists on the Education, Manage Legal Actions, or Medical windows, then no information appears on the related tab of the Case Participant window.

The Medical window provides the functionality to document important medical and mental health information about current health care providers and basic health problems, such as allergies, medications, and dietary concerns.

In the following data model, each Case will have multiple Case Participants. Each Case Participant may have received Education. Each Education record is associated with multiple Schools. Each Education record is historically recorded as a Local Education Agency History.

Each Case Participant may earn wages from multiple Employers. Each Case Participant may have assets, liabilities, or financial benefits recorded as an Asset.

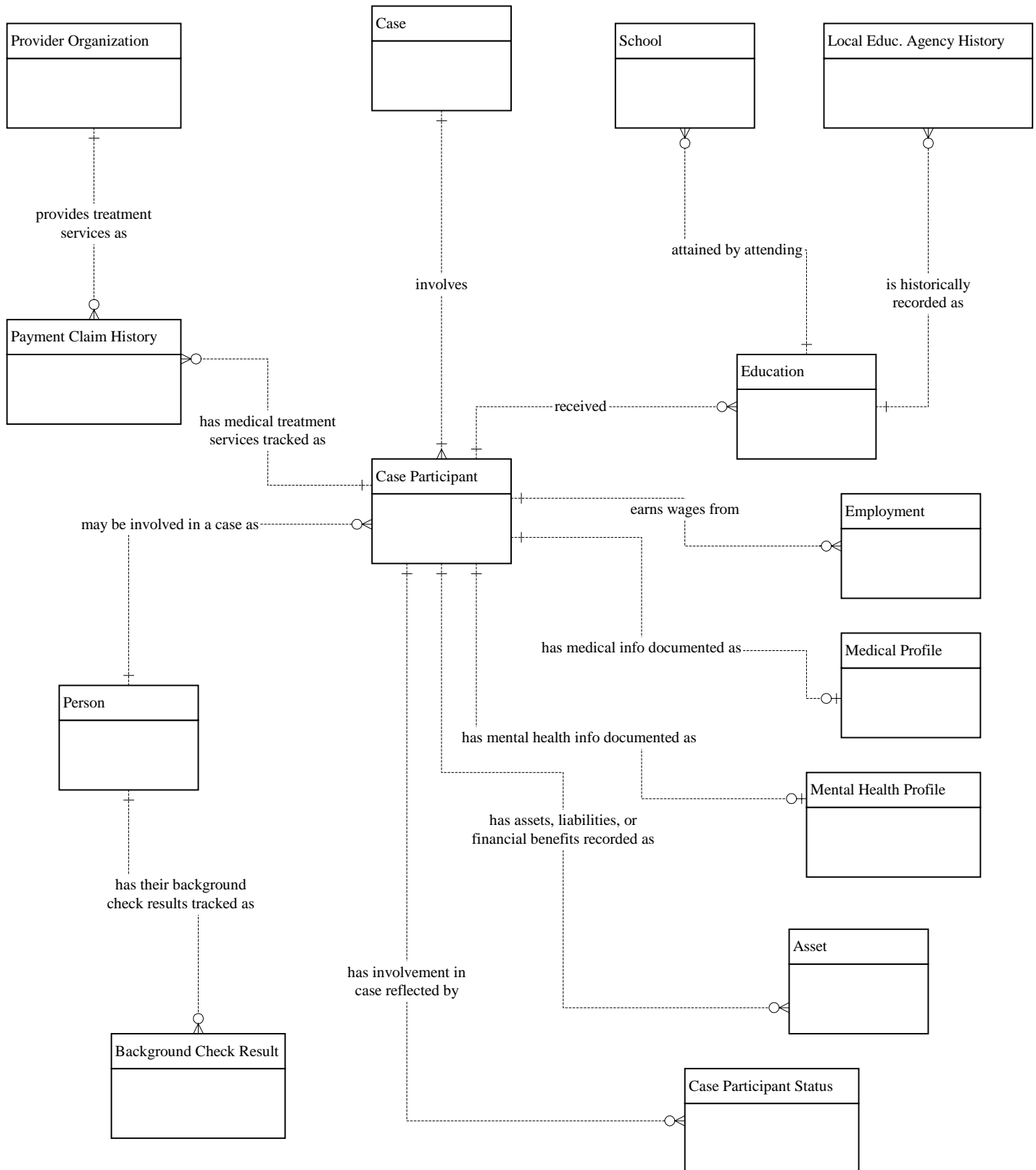
Each Case Participant may have medical information documented as a Medical Profile. Each Case Participant may have mental health info documented as a Mental Health Profile. Each Case Participant may have medical treatment services tracked as Payment Claim History. A Provider Organization provides treatment services as Payment Claim History.

Each Person may have multiple background checks.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Education	EDUCATION
School	SCHOOL
Local Education Agency History	LEA_HISTORY
Employment	EMPLOYMENT
Medical Profile	MEDICAL_PROFILE
Mental Health Profile	MENTAL_HEALTH_PROFILE
Payment Claim History	PAY_CLAIM_HISTORY
Provider Organization	PROVIDER_ORG
Background Check	BCKGCHCK_RESULT
Case Participant Status	CASE_PART_STAT
Asset	ASSET
Person	PERSON



## Case Participant Data Model



## 2.5 Legal

The *Court* design topic provides a historical record of the events leading up to the filing of a legal document with the Courts. Included in this process is the confirmation of dates on which specific actions or pieces of work were requested, completed, or received. Not only does this process improve the accountability surrounding the date of work completion, but it also provides a complete picture of the history surrounding the initiation of a legal action.

Three windows in WiSACWIS are utilized to track the flow of information between social workers and the Courts, generate legal documents, and document activities within the Courts that affect specific cases. All three windows (Legal Action, Legal Status, and Legal Documentation) can be accessed through the Create>Case Work window once the user selects the Legal option in the Subject group box of the Create Case Work window. After the development of a planned course of action, *Court* allows the workers the ability to generate legal documents. Microsoft Word text templates for legal documents are pre-filled with much of the basic information requested in legal forms such as names, addresses, dates of birth, and social security numbers. Using this tool thus eliminates many of the errors that are commonly made while transposing information by hand, and, at the same time, also dramatically reduces the amount of time needed to generate a legal document. While many legal documents are Microsoft Word templates in WiSACWIS, some documents, such as birth certificates, must still be compiled manually by the worker.

After the Department utilizes the Court system, *Court* supports the recording of Court activities, including the Court that heard the action, the outcome of the Court activity, the legal status of the appropriate case participant, and various dates surrounding presentation of a legal action.

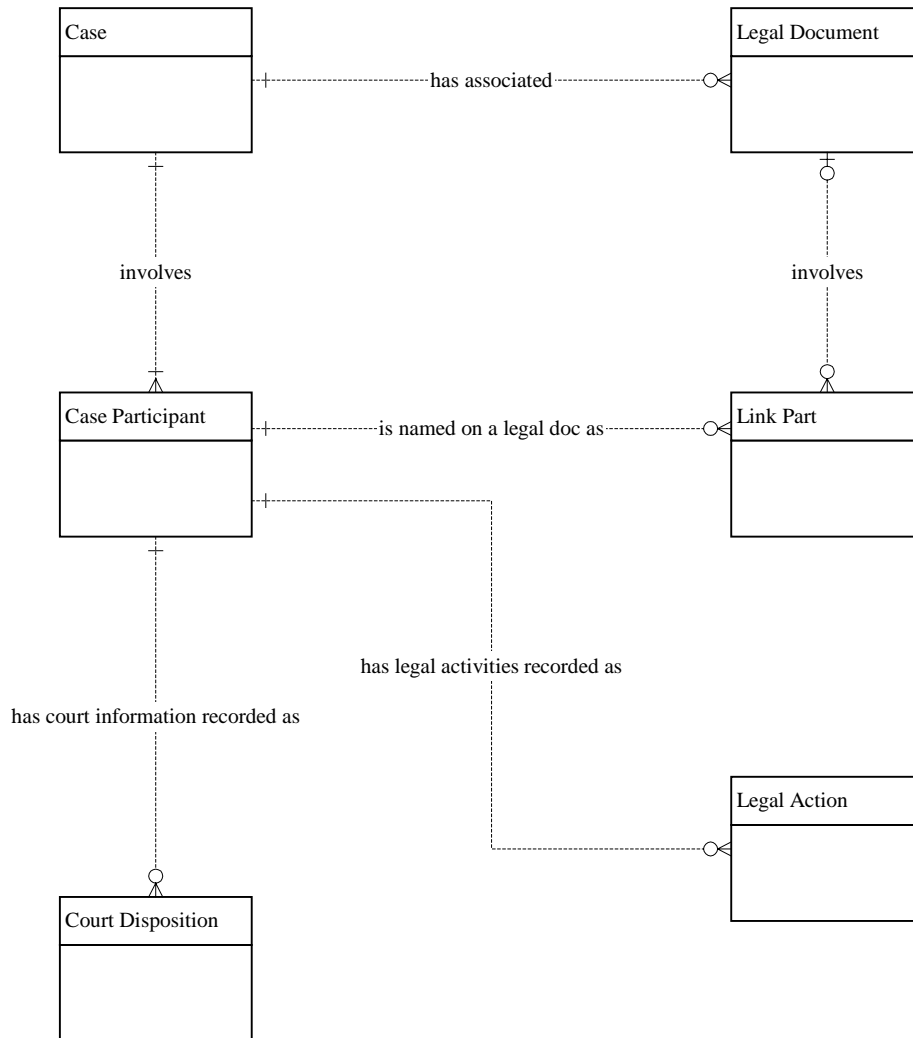
Finally, *Court* sustains the documentation of legal case activity through the use of Case Activity Notes, which are detailed in *CM06: Notes*. This tool provides a running legal narrative for each case that may be viewed in its entirety at any time. Legal Case Activity Notes can be created through the Create > Case Work menu bar option when the user selects the Narrative option in the Subject group box of the Create Case Work window. Once the Case Activity Note window is activated, the user may select the particular type of legal Case Activity Note to be produced. After a legal Case Activity Note has been created, it is filed under the Narrative icon on the Outliner.

As information is entered into *SM09: Court*, the Legal tab of the Case Participant Information window in *SM13a: Case Participant Information* is automatically updated to summarize a participant's most important legal information, including legal status. Though designed as part of this topic, the Legal tab is discussed in *SM13a: Case Participant Information*.

The data model on the following page illustrates how Legal work is recorded in WiSACWIS. Each Case involves multiple Case Participants. Each Case Participant has court information recorded as multiple Court Dispositions. Each Case Participant may have legal activities recorded as Legal Actions. Each Case may have multiple Legal Documents associated with multiple Link Participants.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Court Disposition	COURT_DISP
Legal Documentation	LEGAL_DOC
Link Part	LINK_PART
Legal Action	LEGAL_ACTION

## Legal Data Model



## 2.6 Assessment

The *Assessment* design topic supports the assessment of reports of abuse, neglect, or at-risk situations. These reports/intakes are created by an intake worker using the *SM01a: Protective Services Reports* module to gather initial information. If the report/intake is subsequently accepted as appropriate for assessment by an intake supervisor, then the *SM06a: Assessment* module represents the next step in the DHFS response to a report/intake.

The assessment process builds on the information gathered during intake. This process begins with either the creation of a case from the intake, or the linking of a report/intake to an existing case which is then assigned to the Assessment unit or staff, and ends with the forwarding of the assessment's findings to an Assessment Supervisor, who must review the findings and issue an approval decision. The *Assessment* process involves the gathering of information regarding the case participants identified in the Protective Services (PS) report, and, as appropriate, the inclusion of individuals as case participants who become known during the assessment.

This module also supports the documentation of contacts with case participants and other persons with regard to the situation being assessed. The assessment also incorporates the safety and risk factors concerning the alleged victim(s) as well as other children in the household, and records the assessment results. In addition, risk involved in the case can also be ascertained by using the standard DHFS Family Risk Assessment of Future Abuse/Neglect Actuarial Risk Assessment model. The assessment process ends when the assessor enters a disposition for each allegation, details an overall disposition for the entire assessment, and receives supervisory approval of the assessment findings and documentation.

Each PS Report that is documented and accepted for assessment is classified as either a CPS Family, CPS-DCFS Licensed/Certified Provider, and CPS-Other. The *Assessment* design topic supports the assessment of each of these report types.

The Assessment window is accessed by selecting Create Case Work off of the main menu, selecting the Subject – Assessment, Item – Assessment, and Case Name. This will display the Assessment/Report Link pop-up window where the user will select the PS report(s) for which they wish to complete an assessment. By selecting the OK command button off of the Assessment/Report Link pop-up window, the Assessment window will be displayed.

The *Assessment* topic is comprised of One main window - the Assessment window - which contains the following five tabs: Participants; Basic; Allegations; Contacts and Results. In addition, the Assessment window contains the following fifteen pop-up response windows: Assessment/Report Link; Participant Selection; Roles; Extension; Add Allegation; Descriptions; Initial Assessment–Primary Caregivers; Case Participants/Collaterals; Maltreatment Safety Evaluation; Child Functioning Safety Evaluation; Adult Functioning Safety Evaluation; Parenting Practices Safety Evaluation;

Initial Assessment–Secondary/Non-Caregivers; Family Risk Assessment of Future Abuse/Neglect; and the Modified Initial Assessment–Primary Caregivers which will be described.

The following pop-up windows are accessed directly from the Assessment window: Participant Selection; Roles; Extension; Add Allegation; Descriptions; Initial Assessment–Primary Caregivers; Initial Assessment–Secondary/Non-Caregivers; Family Risk Assessment of Future Abuse/Neglect; and the Modified Initial Assessment–Primary Caregivers.

The following four pop-up response windows are each windows comprised of tabs: Initial Assessment–Primary Caregivers; Initial Assessment–Secondary/Non-Caregivers; Family Risk Assessment of Future Abuse/Neglect; and the Modified Initial Assessment–Primary Caregivers. All of these response windows are accessed from the Basic tab of the Assessment window by selecting the Assmnt. Command button and selecting the appropriate menu item.

To access the Initial Assessment–Primary Caregivers response window, the user will select the Assmnt. (Assessment) command button off of the Basic tab, Assessment window and select the IA Primary Caregivers menu item. This response window will be accessed for all intra-familial assessments and must be completed prior to supervisory approval (BMCW Business Process and not system enforced.) The Initial Assessment–Primary Caregivers response window consists of the following eight tabs: Part. Info. (Participant Information); Maltreatment; Child Fnctng (Child Functioning); Adult Fnctng (Adult Functioning) Par. Practices (Parenting Practices); Risk Rating; Safety; and Support Network. In addition, the Initial Assessment–Primary Caregivers response window contains a further five pop-up windows accessed from it as follows: Case Participants/Collaterals; Maltreatment Safety Evaluation; Child Functioning Safety Evaluation; Adult Functioning Safety Evaluation; and Parenting Practices Safety Evaluation. Built into the Initial Assessment–Primary Caregiver’s module is a consensus risk assessment model as well as a set of safety questions.

To access the Initial Assessment–Secondary/Non-Caregivers response window, the user will select the Assmnt. (Assessment) command button off of the Basic tab, Assessment window and select the IA Secondary Non-Caregivers menu item. This response window will be accessed for all secondary and/or non-caregiver type assessments such as an incident of maltreatment in a school or day care setting, and must be completed prior to supervisory approval (BMCW Business Process and not system enforced.) The Initial Assessment–Secondary/Non-Caregivers response window consists of the following three tabs: Participants; Narratives; and Feedback.

An assessment can only have either an Initial Assessment–Primary Caregivers or Initial Assessment–Secondary/Non-Caregivers assessment completed and not both. For example, if the worker completes the Initial Assessment–Primary Caregivers assessment, the Initial Assessment Secondary/Non-Caregivers menu item on the Assessment window, Basic tab will be disabled and will not allow the worker to display this window.

To access the Family Risk Assessment of Future Abuse/Neglect response window, the user will select the Assmnt. (Assessment) command button off of the Basic tab, Assessment window and select the Family RA of A/N menu item. This response window is optional and can be accessed regardless of the assessment type. The actuarial risk assessment model may be used in addition to the Initial Assessment-Primary Caregivers assessment which contains a consensus risk assessment model as well as safety questions pertaining to the child(ren). The Family Risk Assessment of Future Abuse/Neglect response window consists of the following three tabs: Neglect; Abuse and Results. A more complete discussion of the actuarial risk assessment instrument is covered in greater detail in *SM06b*.

To access the Modified Initial Assessment-Primary Caregivers response window, the user will select the Assmnt. (Assessment) command button off of the Basic tab, Assessment window and select the Mod. IA Primary Caregivers menu item. This response window will be accessed for any assessment where the worker and their supervisor feels a full assessment is not warranted. The Modified Initial Assessment-Primary Caregivers response window consists of the following eight tabs: Part. Info. (Participant Information); Maltreatment; Child Fnctng (Child Functioning); Adult Fnctng (Adult Functioning) Par. Practices (Parenting Practices); Risk Rating; Safety; and Support Network. In addition, the Modified Initial Assessment-Primary Caregivers response window contains a further five pop-up windows accessed from it as follows: Case Participants/Collaterals; Maltreatment Safety Evaluation; Child Functioning Safety Evaluation; Adult Functioning Safety Evaluation; and Parenting Practices Safety Evaluation.

The user may access several Assessment-related notifications/templates via the Options...command button on the Results tab of the Assessment window. The following Notifications are accessed from the Options Command Button: Mandated/Relative Reporter Notice and Notice to Hearing. The Mandated/Relative Reporter Notice is unique in that the user will open the template, select one of the 13 responses in the body of the template. The user will then delete the other 12 responses prior to printing and saving the document. In addition two templates are accessed from the Options button on the Results Tab: Safety Services Cover Sheet and Safety Service Staffing Results. These templates are Microsoft Word documents that pre-fill with existing WISACWIS data and allow the worker to enter additional information pertaining to the assessment.

The Initial Assessment-Primary Caregiver's text template is accessed by selecting the Text command button off of the Part. Info. tab of the Initial Assessment-Primary Caregiver's window. The Initial Assessment-Secondary/Non-Caregivers text template is accessed by selecting the Text command button off of the Participants tab of the Initial Assessment-Secondary/Non-Caregivers window. The Family Risk Assessment of Future Abuse/Neglect Text template is accessed by selecting the Text command button off of the Results tab of the Family Risk Assessment of Future Abuse/Neglect window. Lastly, the Modified Initial Assessment-Primary Caregiver's text template is accessed by selecting the Text command button off of the Part. Info. tab of the Modified Initial Assessment-Primary Caregivers window.

### 2.6.1 Safety

The Safety topic supports the various assessment tools used by DHFS workers. Specifically, the windows in this topic incorporate the following assessment instruments:

- Safety Assessment
- Family Risk Assessment of Future Abuse/Neglect

The windows in this topic provide the functionality to capture the answers to the various questionnaires. Each assessment tool in this topic results in a decision or system determined score that is derived from each instrument's scoring algorithm in addition to DHFS policy. The Family Risk Assessment of Future Abuse and Neglect window also allows a qualified worker to override the system-derived decision and document the reason for the change.

The following windows identify the safety and risk issues for a family/children in WiSACWIS respectively:

- Safety Assessment
- Family Risk Assessment of Future Abuse/Neglect

Both the Safety Assessment and Family Risk Assessment of Future Abuse/Neglect questions presented on the windows were derived directly from the actual DHFS assessment forms.

The Safety Assessment window is used to determine the imminent safety issues surrounding a child(ren). The first Safety Assessment is conducted during the Assessment process when a worker selects the Initial Assessment-Primary Caregivers assessment. This functionality is explained in detail in the *SM06a: Assessment* topic.

The Safety Assessment window is accessed in create mode by selecting Create Case Work off of the main menu, selecting the Subject-Safety Assessment, Item-Safety Assessment and the Case Name and selecting the OK command button. This will display the Safety Assessment window. In view mode, or once the Safety Assessment has been created, it can be accessed by highlighting and expanding the selected case on the case outliner, highlighting and expanding the Safety Assessment icon and highlighting and double clicking on the appropriate Safety Assessment.

The Safety Assessment window is comprised of two tabs named Questions and Results. The Questions tab contains three radio buttons as follows: "Questions 1 to 7"; "Questions 8-14"; and "Questions 15-21." The window will always default to "Questions 1-7." Once the worker has completed the first seven questions, they can access the next set of questions by selecting the "Questions 8-15" radio button. The Results tab provides a summary of the Safety Assessment and contains questions which the worker must answer to aid in determining whether the child(ren) can remain safely in the home while services are provided.



The Safety Assessment template will be generated from the Safety Assessment window by selecting the Text command button off of the Results tab. This template will be generated each time a Safety Assessment is completed and can be viewed by accessing the Safety Assessment window from the Case Outliner, selecting the text button and the Safety Assessment menu item.

The Monthly Cause Analysis template will be generated from the Safety Assessment window by selecting the Text command button off of the Results tab. When this option is selected, the Safety Cause Analysis Template Pop-Up window will be displayed. The user will be able to select the New command button to display a blank template or may double click on one of the prior templates listed by date to open that particular template in view mode. The Monthly Cause Analysis checkbox must be selected in order to enable the Monthly Cause Analysis menu item on the Options command button. If the Monthly Cause Analysis checkbox is not selected, the Monthly Cause Analysis menu item on the Options command button will remain disabled.

The Safety Case Closure template will be generated from the Safety Assessment window by selecting the Text command button off of the Results tab. This template will be generated one time only (at the point of case closure) and can be viewed by accessing the appropriate Safety Assessment off of the Case Outliner and by selecting the text button and the Safety Case Closure menu item. If the Safety Case Closure checkbox is not selected, the Safety Case Closure menu item on the Options command button will remain disabled.

The Family Risk Assessment of Future Abuse/Neglect is accessed in create mode by selecting Create Case Work, selecting the Subject-Assessment, Item-Assessment and selecting the OK command button. This will display the Assessment window. The worker will proceed to the Basic tab and select the Options>FamilyRA Future A/N menu item. The Family Risk Assessment of Future Abuse/Neglect will be displayed. This window is comprised of three tabs labeled as follows: Neglect, Abuse and Results.

The Neglect tab contains two radio buttons as follows: “Questions 1 to 6” and “Questions 7-12.” The window will always default to the Neglect tab “Questions 1-6.” Once the worker has completed the first six questions, they can access the next set of questions by selecting the “Questions 7-12” radio button. The Abuse tab has the same functionality as the Neglect tab i.e., it contains two radio buttons as follows: “Questions 1 to 6” and “Questions 7-12.” Once the worker has completed the first six questions, they can access the next set of questions by selecting the “Questions 7-12” radio button.

The Results tab provides a summary of the Risk Assessment and contains an overrides section where the worker can override the system derived score by either increasing or decreasing the level of risk and providing an explanation for the override.

The Family Risk Assessment of Future Abuse/Neglect template will be generated from the Family Risk Assessment of Future Abuse/Neglect response window by selecting the Text command button off of the Results tab. This template will be generated one time

only and can be viewed by accessing the Family Risk Assessment of Future Abuse/Neglect response window from the Case Outliner, selecting the text button and the Family Risk Assessment of Future Abuse/Neglect menu item.

An Unmet Need is a service need which cannot be met by BMCW or another agency at the present time. Unmet needs are recorded whenever case workers are unsuccessful at locating a service provider for a specific service need. Recording this information can serve as a tracking system for BMCW and Statewide Adoption recruitment or development of services in the future.

Typically, BMCW and Statewide Adoption social workers need to document an unmet need for one of two reasons: either existing BMCW and Statewide Adoption services are inaccessible for some reason (e.g. transportation or child's age), or non-BMCW and Statewide Adoption services are inappropriate.

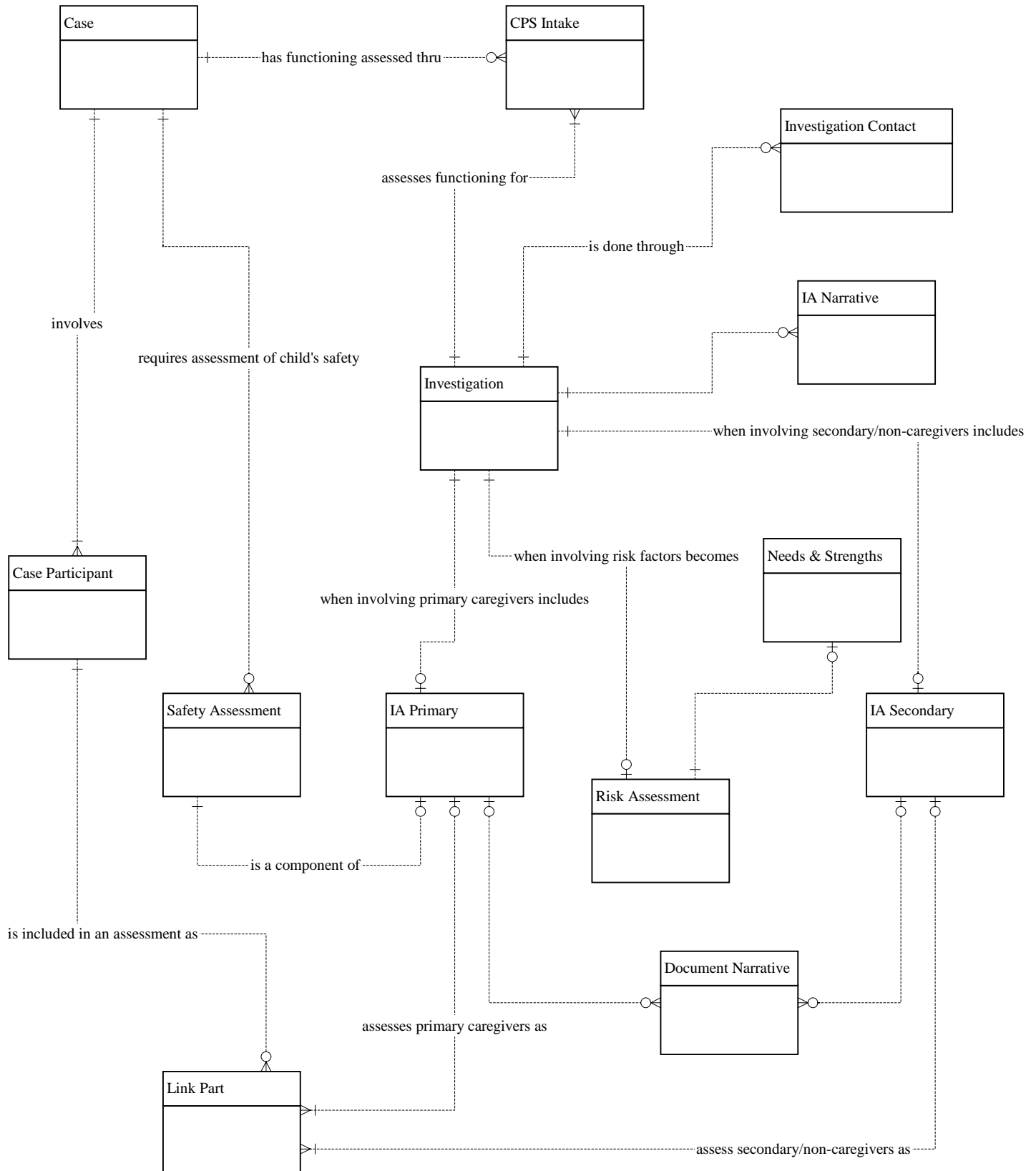
Special needs are recorded during the subsidized adoption process. The primary basis for special needs is also a required attribute for AFCARS reporting. Through the Certification of Special Needs Window, workers will document a subsidized adoption applicant's special needs status, and other adoption-related attributes for AFCARS reporting.

The Data Model on the following page indicates how this information is captured. For every Case there are multiple Case Participants. Each Case Participant in an assessment is included in the Link Part. Each Case requires assessment of child's Safety Assessment. Each Safety Assessment is a component of an IA Primary.

Each Case has functioning access to through CPS Intake. Each CPS Intake will have an Investigation initiated. The Investigation will record primary caregivers in IA Primary. The Investigation will record secondary/non-caregivers as IA Secondary. The Investigation will also have a Risk Assessment. The Risk Assessment may be associated with a Needs and Strengths. The Investigation may have multiple Investigation Contacts. The Investigation may have multiple IA Narratives.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Link	LINK_PART
CPS Intake	CPS_REPORT
Safety Assessment	SAFETY_ASSESSMENT
Investigation	INVESTIGATION
Investigation Contact	INVESTIGATION_CNTC
IA Primary	IA_PRIMARY
IA Secondary	IA_SECONDARY
IA Narrative	
Risk Assessment	RISK_ASSESSMENT
Needs & Strengths	NEEDS_AND_STRENGTHS
Document Narrative	DOC_NARRATIVE

## Assessment Data Model

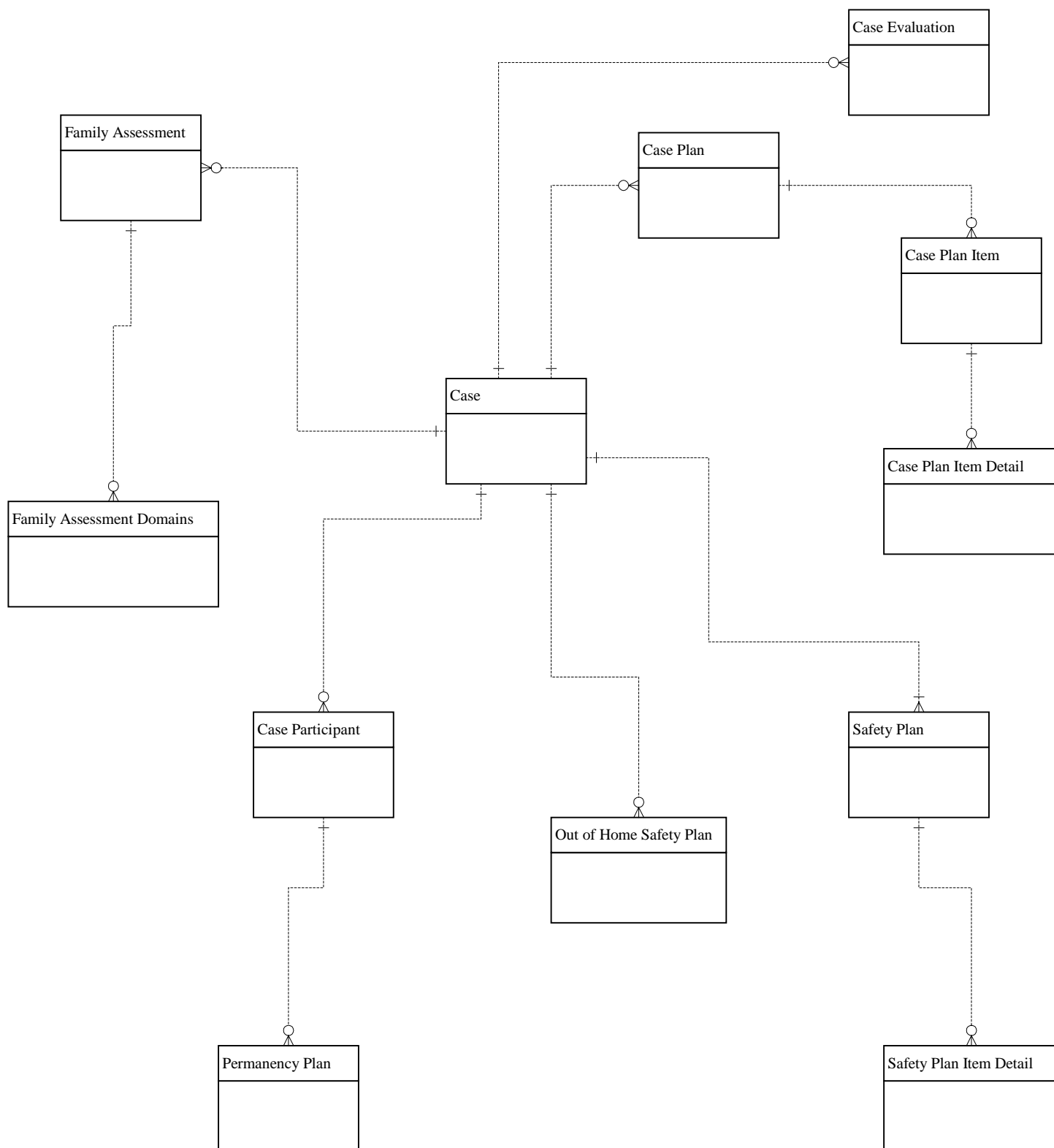


## 2.7 Ongoing Case Management Model

Ongoing Model, which will be used to assess and monitor a family's needs via the completion of a Family Assessment and Case Plan, and later through Case Progress Evaluations.

Data Model Description	Table Name
Case	CASE
Case Plan	CASE_PLAN
Case Evaluation	CASE_EVAL
Case Plan Item	CASE_PLAN_ITEM
Case Plan Item Detail	CASE_PLAN_ITEM_DETAIL
Safety Plan	SAFETY_PLAN
Safety Plan Item Detail	SAFETY_PLAN_ITEM_DETAIL
Case Participant	CASE_PART
Permanency Plan	
Family Assessment	
Family Assessment Domain	

## Ongoing Case Management Data Model



## 2.8 Provider

### 2.8.1 Home Provider

There are two types of providers in WiSACWIS, Home Providers and Private Providers. The *PM02a: Home Provider* topic is the case file for home providers which includes foster homes, adoptive homes and relative (Kinship) homes. This topic provides the basis for a Home Provider record that will help County staff see at a glance the most current information that the department has about the homes. For a Home Provider to be created in WiSACWIS, the provider must first be created through a Home Inquiry.

The Home Inquiry topic is used to document the initial inquiry when becoming foster or adoptive parents. In addition, the topic will be used to record initial information on kinship care homes. Person searches are conducted for all home members, and an initial inquiry record is created and saved as a historical record of the documentation.

Upon initial saving, WiSACWIS makes an automatic assignment to the worker who created the Home Inquiry, resulting in the home inquiry being displayed on the outline of the worker's Intakes tab. The worker/committee then makes an acceptance decision and assigns the work to a supervisor for final acceptance. Once an inquiry is accepted by a supervisor/committee, a 'Home Provider' record is created for the family based on the information gathered in the inquiry process. Please refer to *PM02a- Home Provider* for information on maintaining home providers and *PM04a- Licensing Home Provider* for information on licensing activities.

#### Designated County:

The responsibility for the management of each Home Provider record is allocated to a specific county - referred to as the Home Provider's 'Designated County'. Initially, the county of the worker/supervisor creating the provider record i.e. screening-in the Home Inquiry, is captured as the designated county. Thereafter, the designated county can be changed via the Create Physical Address window: discussed in Topic Paper PM08. Workers of the Home Provider's Designated County manage all aspects of the Home Provider record, including licensing, addition of service types, address changes, change of designated county. Designated County workers are able to select and add service category and types for other counties, to Home Provider records within their county. Although workers from other counties may have open assignments to a Home Provider record, their access to the record, and ability to create work for the Home Provider, is limited. The county of the worker accessing the provider record will always be screened, to establish whether it matches the Designated County, or not.

- Note: the Designated County may differ from the Home Provider's physical location.
- Note: the Designated County is not recorded on any of the Home Provider window tabs. It will be recorded on the desktop outline, alongside the provider name, and on the physical address window.

The following Tabs are available while maintaining the Home Provider records:

- Home
- Members
- Characteristics
- Services
- Training

The Home tab displays and maintains location and contact information about providers of family-based care in a home setting. General information such as Emergency Contacts, Primary Language, Marital Status, and County are documented here and can be updated at any time. This tab is also used to specify the method used to recoup any overpayments made to this provider (refer to FM02b: Overpayment Adjustments topic for more details).

The Home Tab is also used to launch (via the Options button) either the Electronic Funds Transfer pop-up window or the Parent Agency History pop-up window. The Electronic Funds Transfer pop-up window allows the worker to complete the steps required for automated direct deposits of payments to the Provider. The Parent Agency History pop-up window allows the worker to add a Parent Agency or to change an existing Parent Agency for the provider.

The Members Tab displays information about individuals residing at the physical location of the home, including all household members, such as parents, birth children, relatives, non-relatives, and children currently under placement in that home. The worker can deactivate, reactivate, add or remove a person from the members tab, each through the respective selection on the Options button. The payee name(s) field is also located on this tab. Information about children who are currently in placement with the home is viewable from this tab.

The Characteristics Tab allows the worker to record helpful information that assists the worker when making placement decisions for a child. The Characteristic Tab includes what the Family Accepts and what Other Family Characteristics the Providers have. The Family Accepts list box displays information about the characteristics of children that the family is willing to accept for potential placement in the home. This includes preferences, restrictions, and assessments, and can be identified as searchable criteria at the time of completing a provider service search. The Other Family Characteristics list box lists contains those characteristics of the home that may affect a decision to place a child there; this information may not be identified as searchable criteria at the time of completing a provider service search.

The Services Tab maintains current information about the specific services offered by a home provider. It has the following major features that allows the worker to maintain multiple services for a given family, each service with its own status. Examples of these services are Foster Care 0-5, Adoptive Care. The tab also displays the capacity, number of placements, number of reservations and current vacancies with the home for each service; and it allows authorized workers with proper security access to change the status of services, if the provider has obtained the license that the service type requires.

Through the Options button, the worker can access the appropriate service rate window. If the service type requires a provider specific rate, the worker will be taken to the Provider Service Rate window (documented in the *PM02b: Private Provider* topic paper).

If the selected service type in question requires a service specific rate, the worker will be taken to the Service Rate window (documented in the *PM01: Maintain Services* topic paper). To check on existing bed reservations, the worker can select the Bed Reservation window using the Options button located on the Services tab.

The Training Tab documents information about training classes and training. The worker is allowed to add new training classes to the Provider's record or maintain existing training records by selecting the maintain button. The Date Complete field will determine the order that the training courses are displayed on the Home Provider Training Tab. This will aid the worker in assessing the training needs and training history of the Provider. The worker can send the Provider a letter regarding specific training information using the Training Letter template that is accessed from this window.

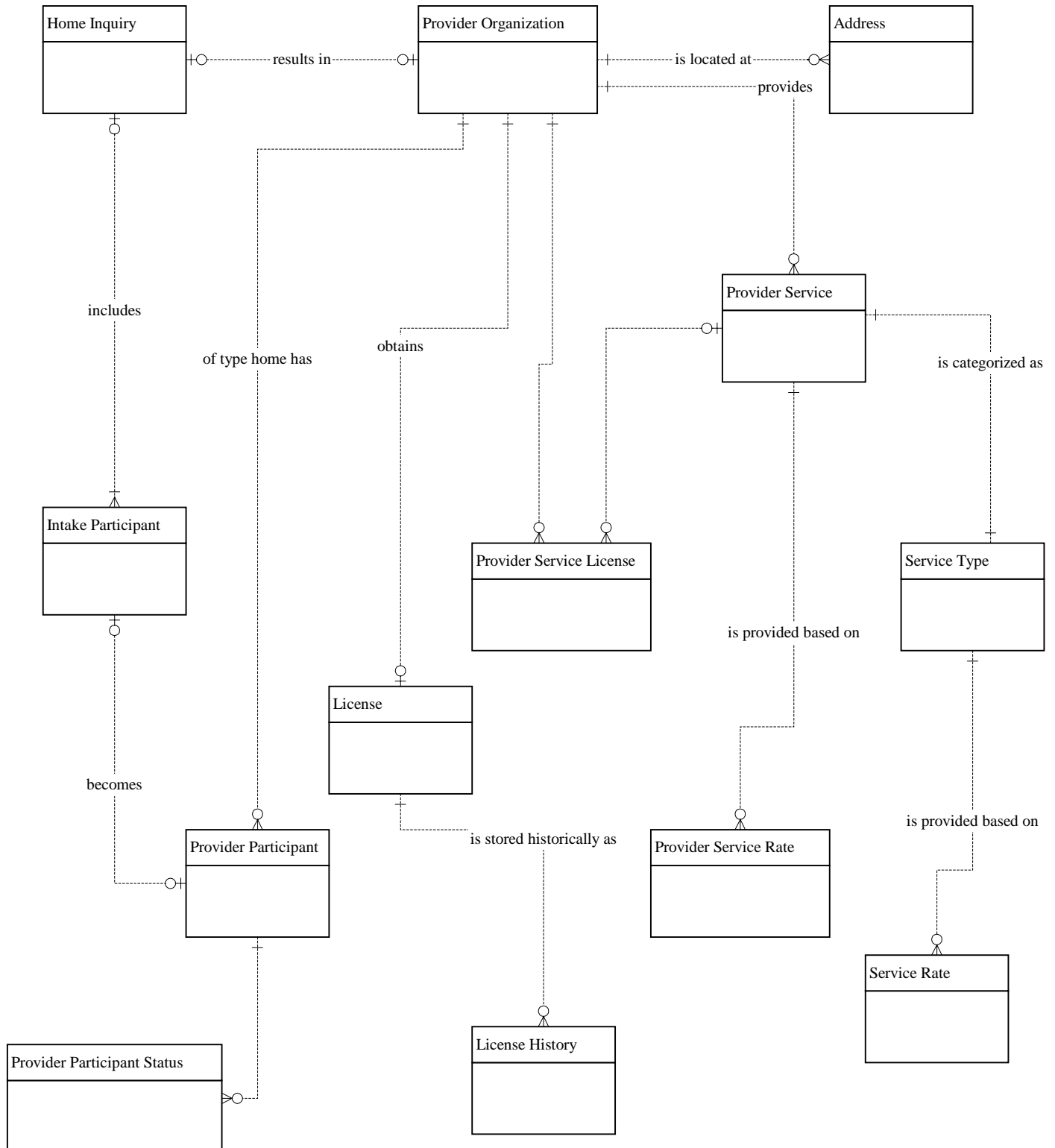
A data model is shown on the following page. Through a Home Inquiry, multiple Intake Participants will be listed. Each Intake Participant will become a Provider Participant. Each Home Inquiry may become Provider Organization. Each Provider Organization may obtain a License stored on Provider Service License. Each License may be stored in the License History.

Each Provider Organization may have multiple Addresses. Each Provider Organization provides multiple Provider Services. Each Provider Service is categorized as a Service Type. A Service Rate may be established at the Service Type level, or made specific to that Provider.

Data Model Description	Table Name
Home Inquiry	HOME_INQUIRY
Intake Participant	INTAKE_PART
Provider Organization	PROVIDER_ORG
Provider Participant	PROVIDER_PART
License	LICENSE
License History	LICENSE
Provider Service License	PRVD_SRVC_LCNS
Address	ADDRESS
Provider Service	PROVIDER_SERVICE
Provider Service Rate	PRVD_SRVC_RATE
Service Type	SERVICE_TYPE
Service Rate	SERVICE_RATE



## Home Provider Data Model



### 2.8.2 Private Provider

The *PM02b: Private Provider* design provides the basis for a Private Provider record that will help County staff to see, at a glance, the most current information about these providers.

The *PM02b: Private Provider* windows support the on-going maintenance of this information with a window made up of three tabs. On these tabs, the most current information regarding contact information, provider characteristics and services offered is maintained. Different staff may need to interact with providers in very different ways depending on their particular job function. Each of these workers will consult the Private Provider file in order to learn more about a specific provider.

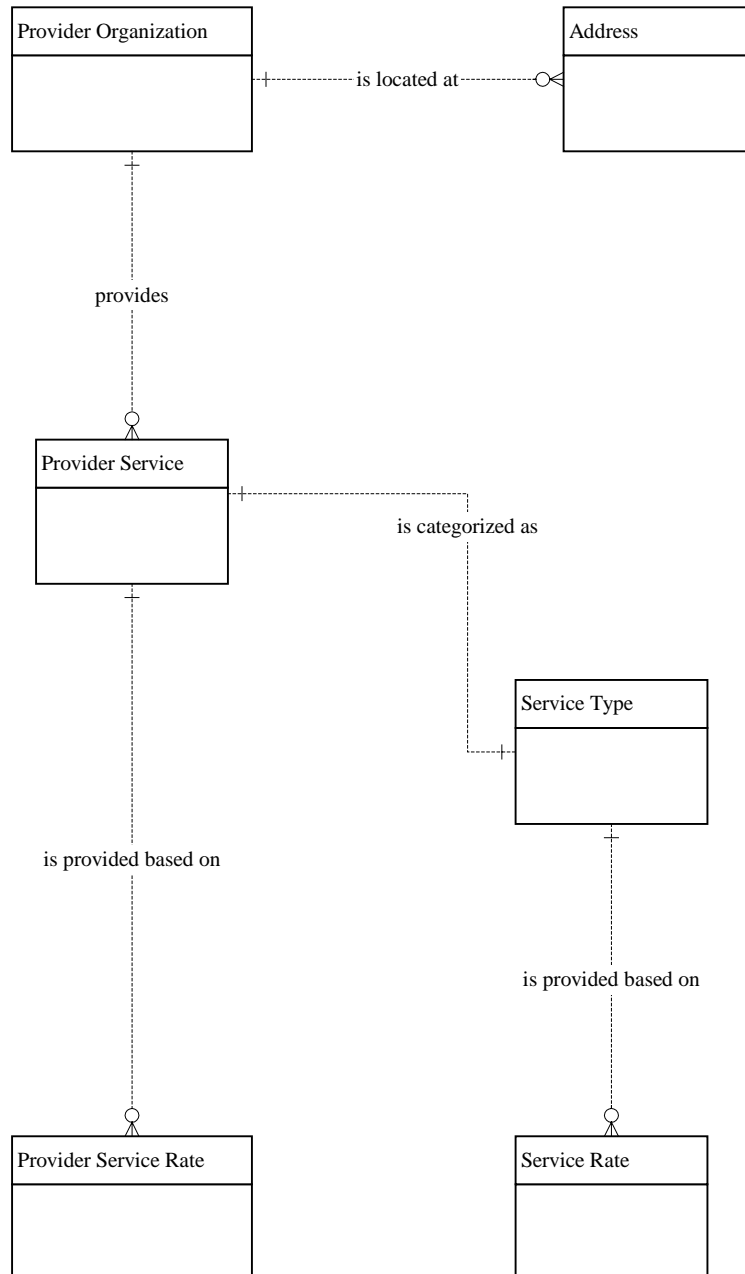
The *PM02b: Private Provider*, like the *PM02a: Home Provider*, touches on the concept of a “provider-service”. In order to accommodate all providers and all the services they offer, WiSACWIS uses a separate Provider Service table that contains information about the particular services offered by a provider and how many slots or beds are vacant. These “provider-services” are viewed and maintained on the Services tab of the Private Provider case file folder.

A Private Provider can be a business, organization, or an individual. The use of the *PM02b: Private Provider* windows gives WiSACWIS a common look and feel across all private providers. It may be necessary to document detailed information in the form of free text about private providers (such as meeting notes). In these cases, the worker will be able to document the information using CM06 - *Provider Notes* (PNs).

On the following page is a data model of the Private Provider module. Each Private Provider may have multiple Addresses. Each Provider Organization provides multiple Provider Services. Each Provider Service is categorized as a Service Type. A Service Rate may be established at the Service Type level, or made specific to that Provider.

Data Model Description	Table Name
Provider Organization	PROVIDER_ORG
Address	ADDRESS
Provider Service	PROVIDER_SERVICE
Provider Service Rate	PRVD_SRVC_RATE
Service Type	SERVICE_TYPE
Service Rate	SERVICE_RATE

## Private Provider Data Model



## 2.9 Placement

One of the most highly visible and commonly used procedures utilized by DHFS workers is the process through which children who are in the care of the Department are matched with service providers. Within WiSACWIS, service providers are defined as organizations or individuals that offer placement opportunities or treatment services to DHFS families. A placement is the process through which a DHFS child is provided with a living environment that differs from his/her original home setting prior to being involved with the Department. In most situations, a service is a program (external to DHFS) used to provide treatment options to Department families. While every placement is a service, not every service is a placement (e.g. the provision of out-patient psychological treatment is a service, but not a placement). *SM10a: Out-Of-Home Placement / In Home Services* discusses the functionality by which WiSACWIS workers will document placements through the Out-Home-Of-Home Placement window, the In Home Services window, and the Agreements and Notices window.

Because many of the attributes that must be defined for the services and placements utilized by the Department are financially related, this topic is a bridge between the distribution of services to DHFS families and the considerations of establishing financial relationships with service providers. More specifically, a worker may use the windows of this topic to request out-of-home placements and in-home services for children, produce placement and service notifications and agreements, record the details of an out-of-home placement or in-home service for children (including the specification of child-specific service rates for appropriate service types and the updating of service capacity information), and document the termination of a placement (which also updates service capacity information).

There are four main windows discussed in this topic. They include the CPS Placement Request window; the Out-of-Home Placement window; the In Home Services window; and the Agreements and Notices window.

The CPS Placement Request window is used to request an out-of-home placement from the Out of Home Care Unit. It is accessed via Create > Casework, selecting Placement as the Subject, selecting CPS Placement Request as the Item, and then choosing the family case and the case participant. Furthermore, the CPS Placement Request window has links to several other design topics, including *PM06: Reservation* and *CM10: Search*.

The process of making a placement can be initiated in *SM10a: Out-of-Home Placement* topic paper. This topic uses the provider-service search to locate potential out-of-home placements for children. When a placement worker has identified one or more potential homes in which a child could be placed, he/she can access the Reservation window from the windows of the *SM10a: Out-of-Home Placement* topic paper.

Reservations become part of the capacity information used to calculate space availability. If a user reserves the last available slot with a service provider, the system will consider

that provider's capacity to be 'full'. In the same way, upon expiration of a reservation, a provider's capacity is updated to indicate availability of an additional service slot.

The Out-of-Home Placement window is used to document the information pertaining to the out-of-home placement of a child. The window is comprised of two tabs; Service and Provider. There are six pop-up windows that launch from the Out-of-Home Placement window. They are the Removal From Home Reasons, the Non-Conforming Reasons, the Service Ending, the Supplemental Points, the Placement Notifications, and the Split Payment pop-up windows. The Out-of-Home Placement window is launched by selecting Create > Casework, selecting Placement as the Subject, selecting Out-of-Home Placement as the Item, and then choosing the family case and the participant within the family that the worker wishes to place.

The In Home Services window is used to document services being provided to the family that do not necessarily require the child to be removed from the home. The window is comprised of two tabs; Service and Provider. There are four pop-up windows that launch from the In Home Services window. They are the Service Ending, the Supplemental Points, the Placement Notifications, and the Split Payment pop-up windows. The In Home Services window is launched by selecting Create > Casework, selecting Placement as the Subject, selecting In Home Services as the Item, and then choosing the family case and the case participant.

The Agreements and Notices window handles the functionality to create legal agreements dictating the terms of a particular placement. There is one pop-up window that launches from the Agreements and Notices window. It is the Adoption Agreement Amendments pop-up window. The Agreements and Notices window is accessed by selecting Create > Casework, selecting Placement as the Subject, selecting the appropriate agreement type as the Item, and then choosing the family case and the case participant within the family.

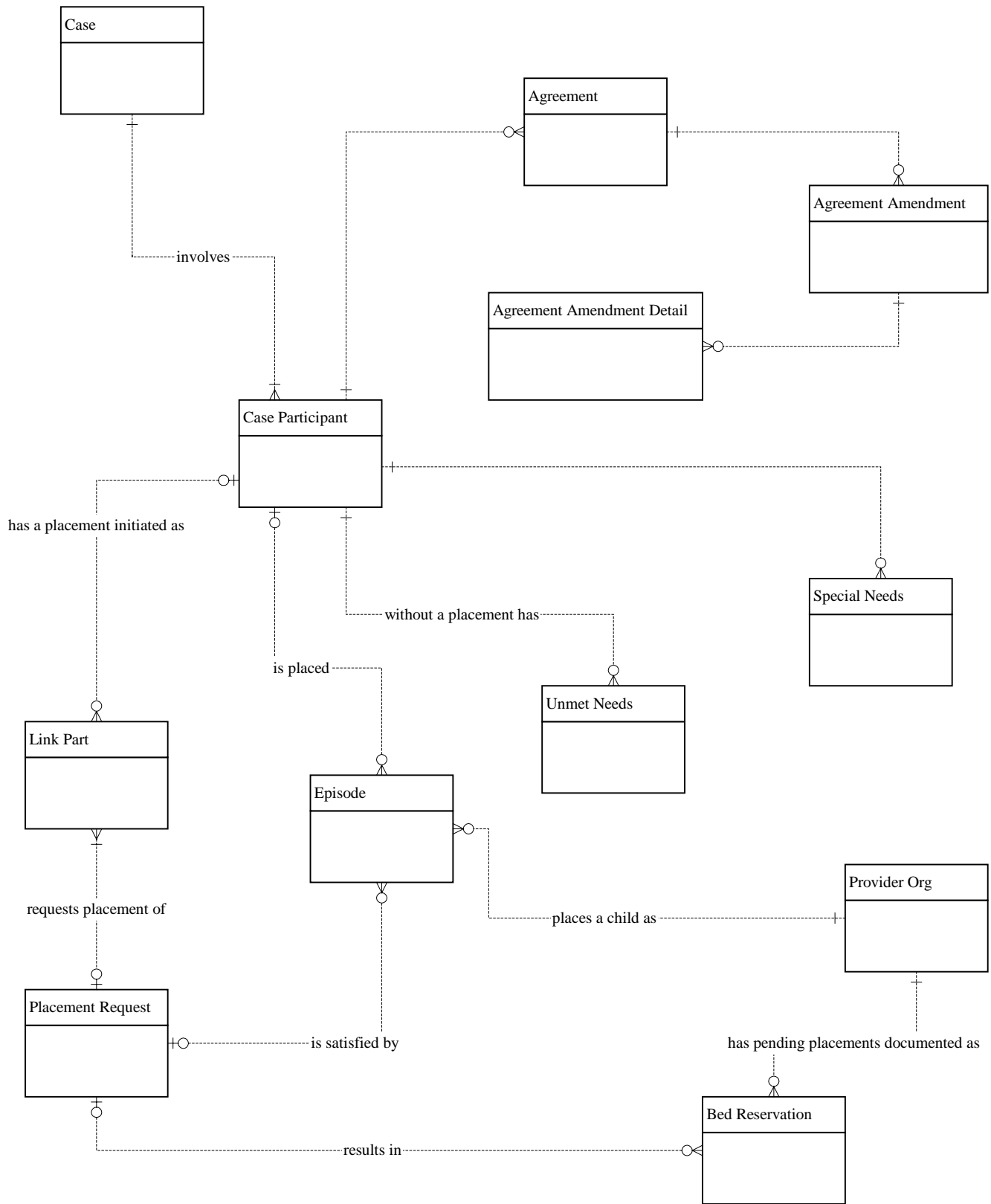
The data model on the following page illustrates the recording of a placement. For each Case there are multiple Case Participants. Each Case Participant without a placement may have multiple Unmet Needs. Each Case Participant in need, has placement initiated as a Link Part. The Link Part establishes a Placement Request. The Placement Request will establish a Bed Reservation with a Provider Organization. Once the placement request is accepted by the Provider Organization, the child will have an Episode.

A Case Participant may also have many Agreements. These Agreements may have multiple Agreement Amendments and Agreement Amendment Details.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Unmet Needs	UNMET_NEEDS
Special Needs	SPECIAL_NEEDS
Agreement	AGREEMENT

Agreement Amendment	AGREE_AMEND
Agreement Amendment Detail	AGREE_AMEND_DTL
Link Part	LINK_PART
Episode	EPISODE
Provider Organization	PROVIDER_ORG
Placement Request	PLACEMENT_REQUEST
Bed Reservation	BED_RESERVATION

## Placement Data Model



## 2.10 Worker

*Worker Assignment* (CM02) supports the creation of case and non-case related worker assignments in the context of business processes (i.e., case management actions). This topic provides a flexible structure to maintain worker assignment information and supports various business processes described below.

Worker Assignment functionality gives users the capability to create an assignment from the Cases, Providers, Workers, and Intakes Tabs. Categories, types, responsibilities, and roles define the structure of worker assignments. One case, provider, or intake may be assigned to more than one worker at a given point in time. This is accomplished through the use of the various assignment categories, functions, and roles. Depending upon the requirements of various business processes, the structures can be defined in such a manner to provide either generic or detailed assignment information.

Case assignments can be created in several ways:

- Assignments can be made automatically through the creation of some piece of work. For example, a PS Report is automatically assigned to the party creating it.
- Workers can create assignments from a business process window. This type of assignment creation may occur when a pop-up message prompts the user to create an assignment. Workers can make assignments only to supervisors and only when system prompted from a specific business process. For instance, a worker accepting a PS Report is prompted to create an assignment for his or her supervisor.
- Manual creation of assignments can occur when a supervisor needs to assign a case. For example, an assessment supervisor may make concurrent assignments by assigning a case to an out-of-home care unit supervisor in addition to the original treatment worker already assigned to the case. Once the new assignment is successfully created, WiSACWIS sends automated messages to notify appropriate persons that they have been assigned to a case. Further, WiSACWIS allows the assigning supervisor to reassign selected ticklers, if necessary.
- If a supervisor wishes to create case participant specific assignments, he or she can indicate a case participant assignment or reassignment rather than assign the entire case. In this situation, a supervisor must be assigned to a case participant or must be able to highlight a case participant specific assignment in order to create another worker's assignment to the same case participant. A case participant assignment appears under the participant icon on the Participant view of the Cases tab of the Outliner.

WiSACWIS aids supervisors in reassigning work. A reassignment of work means that one worker's assignment to a piece of work is closed at the same point in time that an assignment to the same piece of work is given to another worker. When performing a reassignment, WiSACWIS uses the same category, function and role from the old assignment to create the new assignment.

This can be used, for example, when a worker takes a leave of absence. The supervisor reassigns the case by accessing the Maintain Worker Assignment window for the existing assignment. Clicking the Reassign... command button causes WiSACWIS to access the Create Worker Assignment window. WiSACWIS pre-fills the category, function and role automatically from the information on the existing assignment. The supervisor only



needs to pick the worker to receive the reassigned work. Only supervisors can make reassignments. Reassignments can be made either for a single assignment or for all assignments (global reassignment) to a given worker. Workers can make assignments prompted by certain business processes but cannot use general reassignment functionality.

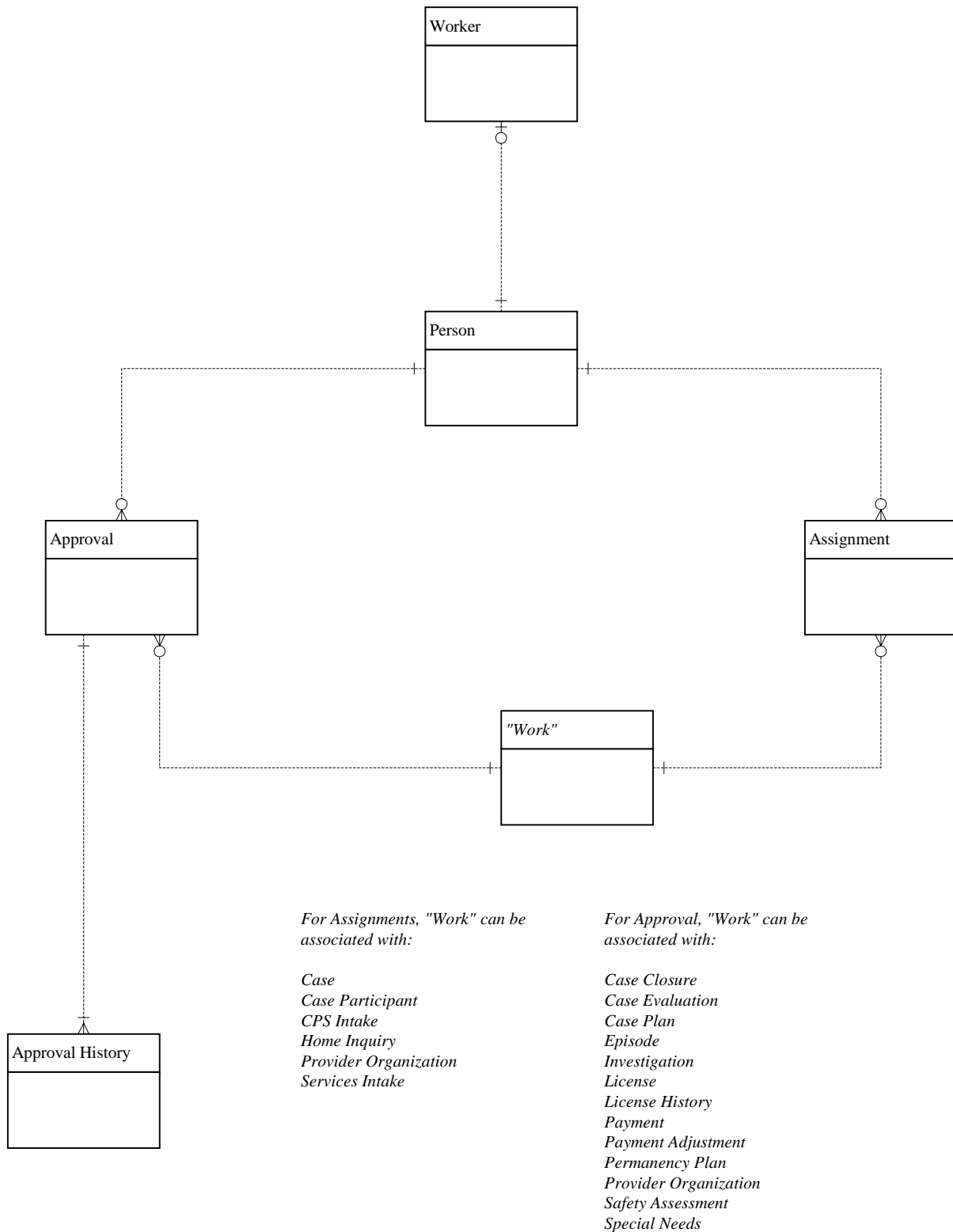
The Worker Assignment function also gives authorized users (supervisors) the capability to manually close an assignment. The manual closing of an existing assignment occurs in two ways. In the Create Worker Assignment window, supervisors can select the Close radio button in the Current Worker Status group box. Similarly, on the Worker Assignment screen, supervisors can select the Close radio button in the Current Worker Status group box.

Supervisors can only make assignments to workers in their own chain of command. When work needs to be given to a worker outside of the chain of command, but within the same county, the supervisor may assign the work to another supervisor. When an assignment needs to be made across county or site lines, the assignment must be made to another supervisor within that county or site.

In the following data model, a Worker must exist as a Person. This Person may have multiple Assignments to various pieces of “Work.” (e.g. Case or Provider). The Person will record their Approvals and a complete history of all approvals will be maintained on Approval History. The level of approval is based on the type of work. (e.g. A Payment’s approval level is based on the Job Class of the Service Type).

Data Model Description	Table Name
Worker	WORKER
Person	PERSON
Assignment	ASSIGNMENT
Approval	APPROVAL
Approval History	APPROVAL_HISTORY

## Worker Data Model



## 3.0 Financial Interface

This section deals with the Financial Management tables in WiSACWIS. Though a single interface is being used to transmit data to the County, the tables can be divided into two categories: Case Management and Financial.

Financial Management in WiSACWIS consists of three core modules.

- Payments
- Checks
- Trust Accounts

These core modules will each be described in three parts. The first part will be a brief high level description of this module. The second part will include a data model of the relationships within this section. The third part will list the tables included in this module.

The Data Dictionary contains the most current information. The current data models and the details of each field element can be retrieved from the Data Dictionary. Also, from the Data Dictionary can be generated a data mapping report, which is useful for performing mapping with a County's existing system(s) (See Appendix A). The Data Dictionary is discussed in further detail in the *Interface Strategy for County Case Management and Financial Interfaces*.

### 3.1 Decision Tree

The first step in the process is to decide if a County will need to implement the financial interface. A County may opt to be a "Manual County" or an "Financial Interface County."

#### 3.1.1 Manual County

A Manual County will have check data generated by WiSACWIS. The County will manually record the WiSACWIS check information into the county existing check write system. Once the check has been issued, a Manual County will use the WiSACWIS Check Number Recording window to manually enter the check number and check date. Once the check numbers and dates have been entered to WiSACWIS, the reimbursement process will begin. Details of payments are discussed in topic paper *FM01 Payment Processing*. Details of checks are discussed in topic paper *FM02 Check Processing*. Details of overpayments are discussed in topic paper *FM02b Overpayments*.

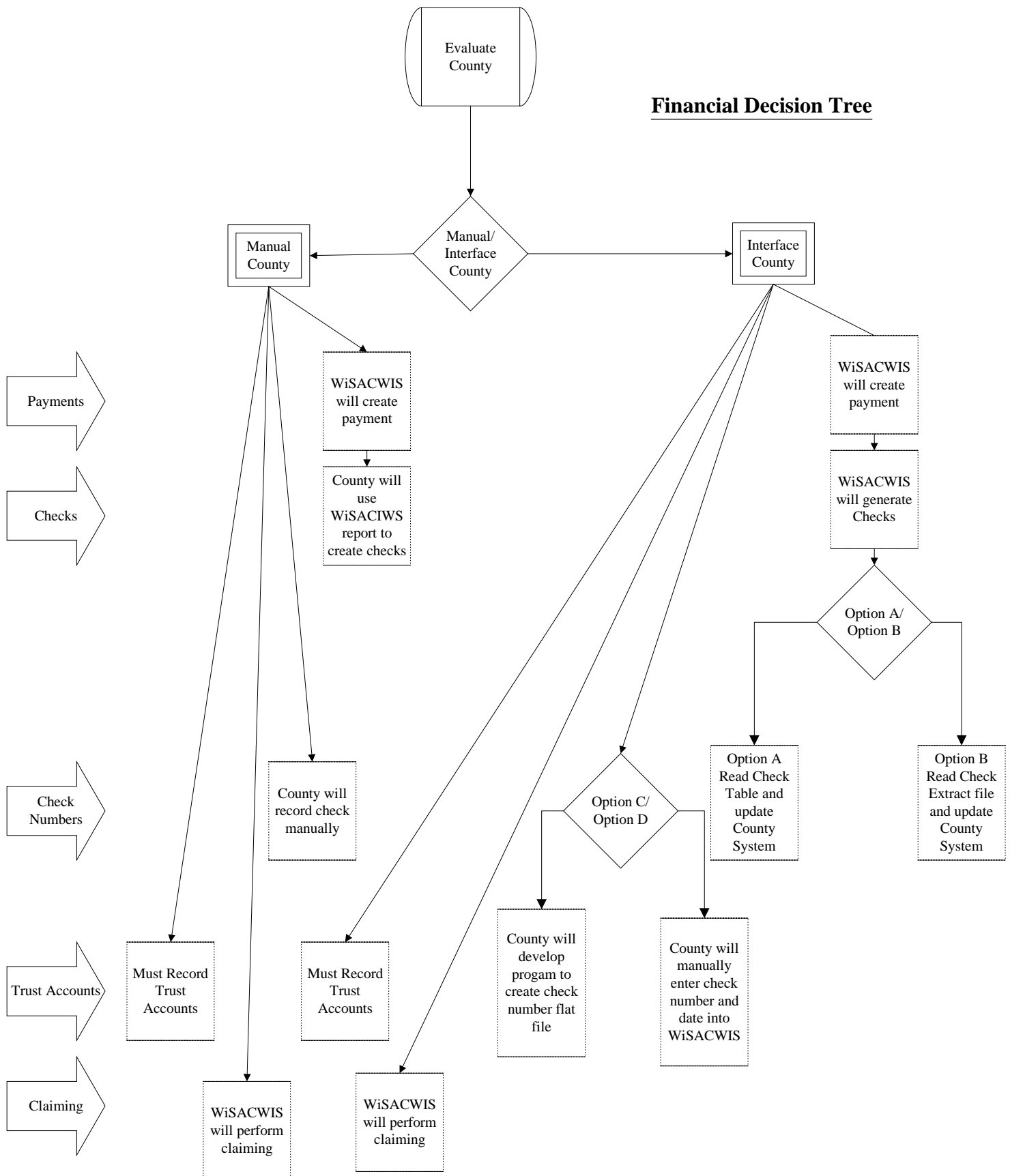
Trust Funds must also be recorded in WiSACWIS, in order in order to use these funds towards ongoing care expenses. After a payment has been generated WiSACWIS will calculate how much money to reimburse the County from a child's trust. The amount is used to offset the original amount of the payment, so in order to calculate the claimable portion from Title IV-E and Title XIX. Details of these calculations are discussed in the topic paper *FM04a Reimbursement*. Details of recording trust funds are discussed in the topic paper *FM07 Trust Accounts*.

### 3.1.2 Financial Interface County

A Financial Interface County will have check data generated by WiSACWIS. This must be a two-way interface. The County will use the check data in WiSACWIS to write County checks using one of two methods. The first option is to use the Check Write extract file to update their existing check write system. The second option, the County uses the CHECKS table to retrieve check amounts and update their existing check write system.

In return a County must have the ability to send check numbers and dates back to WiSACWIS. Here again the County has two options available to them. The County may use the WiSACWIS Check Number Recording window to manually enter the check numbers for each provider. The second option is for a County to generate the flat file directly from the County check write system. The Check Printed extract file will be sent to WiSACWIS. Once the check numbers and dates have been saved to WiSACWIS, the reimbursement process will begin. Details of payments are discussed in topic paper *FM01 Payment Processing*. Details of checks are discussed in topic paper *FM02 Check Processing*. Details of overpayments are discussed in topic paper *FM02b Overpayments*.

Trust Funds must also be recorded in WiSACWIS, in order in order to use these funds towards ongoing care expenses. After a payment has been generated WiSACWIS will calculate how much money to reimburse the County from a child's trust. The amount is used to offset the original amount of the payment, so in order to calculate the claimable portion from Title IV-E and Title XIX. Details of these calculations are discussed in the topic paper *FM04a Reimbursement*. Details of recording trust funds are discussed in the topic paper *FM07 Trust Accounts*.

**Financial Decision Tree**

## 3.2 Sending Payments from WiSACWIS to the County

The payment and check amounts will be transferred to the County using one of two methods.

### 3.2.1 Option A

The first method involves the use of the Check extract file. The County would be required to develop a batch program to read this flat file and update their existing system.

The flat file length is 714. The flat file layout is as follows:

WiSACWIS Mapping	Database Type	County field Mapping	Type
IFC_PROVIDER_ID	Char(10)		Pic X(10)
IFC_PAYEE_ID	Char(10)		Pic X(10)
IFC_PAYEE_NAME	Char(30)		Pic X(30)
IFC_FINANCIAL_INST_NAME	Char(32) Spaces		Pic X(32)
IFC_DIRECT_DEPOSIT_INDICATOR	Char(1)		Pic X
IFC_ACCOUNT_NUMBER	Char(10) Spaces		Pic X(10)
IFC_CHILD_IDENTIFIER	Char(14)		Pic X(14)
IFC_CHILD_LAST_NAME	Char(25)**		Pic X(25)
IFC_CHILD_FIRST_NAME	Char(15)		Pic X(15)
IFC_CHILD_MIDDLE_INIT	Char(1)		Pic X
IFC_CHILD_SUFFIX_NAME	Char(3)**		Pic XXX
IFC_MAIL_FIRST_STREET_ADDR	Char(40)**		Pic X(40)
IFC_MAIL_SECOND_STREET_ADDR	Char(30)**		Pic X(30)
IFC_MIAL_IN_CARE_OF_NAME	Char(30)*		Pic X(30)
IFC_MAIL_CITY_NAME	Char(22)*		Pic X(22)
IFC_MAIL_STATE_NAME	Char(2)		Pic XX
IFC_MAIL_ZIP_CODE	Char(5)		Pic X(5)
IFC_MAIL_ZIP_CODE_PLUS_4	Char(4)		Pic X(4)

IFC_MAIL_FOREIGN_ADDRESS	Char(15) Spaces		Pic X(15)
IFC_REM_FIRST_STREET_ADDR	Char(40)**		Pic X(40)
IFC_REM_SECOND_STREET_ADDR	Char(30)**		Pic X(30)
IFC_REM_IN_CARE_OF_NAME	Char(30)*		Pic X(30)
IFC_REM_CITY_NAME	Char(22)*		Pic X(22)
IFC_REM_STATE_NAME	Char(2)		Pic XX
IFC_REM_ZIP_CODE	Char(5)		Pic X(5)
IFC_REM_ZIP_CODE_PLUS_4	Char(4)		Pic X(4)
IFC_REM_FOREIGN_ADDRESS	Char(15) Spaces		Pic X(15)
IFC_PAYMENT_TYPE	Char(2)		Pic XX
IFC_PAYMENT_START_DATE	Char(10)		Pic X(10)
IFC_NUMBER_OF_DAYS	Char(3)		Pic XXX
IFC_SIGN	Char(1) Values = '+'(positive ) '-'(negative)		X
IFC_AMOUNT	Number(7,2)** *		PIC 9(5)V99
IFC_VOUCHER_NUMBER	Char(5)		Pic X(5)
IFC_VOUCHER_TYPE_CODE	Char(2) Value = 'IM'		XX
IFC_VOUCHER_DATE	Char(10)		Pic X(10)
IFC_FUND	Char(2) Value = '05'		XX
IFC_DEPARTMENT	Char(3) Value= '435'		XXX
IFC_SERVICE_DESCRIPTION	Char(40)		Char(40)
IFC_COURT_NUMBER	Char(8)		Char(8)
IFC_COUNTY_CODE	Char(2)		Pic X(3)
IFC_COUNTY_PERSON_ID	Char(20)		Pic X(20)
IFC_COUNTY_CASE_ID	Char(20)		Pic X(20)
IFC_COUNTY_PRVD_ID	Char(20)		Pic X(20)



IFC_RPT_CAT	Char(5)		Pic X(5)
IFC_EPISODE-ID	Char(14)		Pic X(14)
IFC_PAYMENT_ID	Char(14)		Pic X(14)
IFC_COUNTY_PAYEE_ID	Char(20)		Pic X(20)
IFC_CD_SRVC	Char(9)		Pic X(9)
IFC_TARGET_POP	Char(5)		Pic X(5)
IFC_SPC	Char(5)		Pic X(5)
FILLER	Char(40)		

\* Fill with spaces

\*\* Truncate spaces

\*\*\* Truncate zeroes

In this layout a separate row is created for Basic Amount, the Exceptional Amount, Supplemental Amount, and the Administrative Amount.

### 3.2.2 Option B

The second option exists for the County to use the extract database, and develop a batch program to read this database and update their existing check write system. The State will make available to the Counties the program (COBOL) and the detail design mentioned in Option A. This program can be modified by the Counties to read the WiSACWIS database and update the County database. This modification will be the responsibility of the County. Below is a description of how a county could possible design a program to read the WiSACWIS database and capture the data elements needed to create a check.

**Program Name:** b-fm02-county-check-interface

**Process Summary:** This interface will read all WiSACWIS payments and payment adjustments associated with the current check run that will be imported into the county financial system, in order to cut checks and maintain accounts.

The program should search the CHECKS table for “In Process” Checks. The Checks are associate with multiple payment rows. The details of the PAYMENT can be retrieved and used to created check in the county system and update the general ledger. Below is a description of how each element needed for a check can be

retrieved. The data elements retrieved, are listed at the end of the Process Description.

**Frequency:** Monthly/Weekly

**Dependencies:** fm02-chk-file-CC-YYYYMMDD must be sent to county VPN.

**Input Parameters:** fm02-c-parameter  
 - **parmdate**  
 - **county code**

**Input Files:** None

<b>Database Tables:</b>	ADDRESS	R
	CHECKS	R,
	PAYMENT	R,
	PAYMENT_ADJUSTMENT	R,
	PERSON	R
	PROVIDER_ORG	R
	SERVICE_TYPE	R
	VOUCHER_NUMBER	R,

#### Step 1: Determine Current Voucher Number

Once fm02-chk-file-CC-YYYYMMDD is created, this program should run and Select VOUCHER\_NUMBER.ID\_VCHR\_NO\_CRNT . Take this number and subtract 1, in order to determine the last voucher number used in the WiSACWIS Check run. Store number in WS-VOUCHER-NO.

#### Step 2: Select In Process Checks

Select all records from the Checks table where CHECKS.CD\_CHK\_DISP= 'I' (In Process) and CHECKS.CD\_CHK\_METH= 'S' and CHECKS.DT\_DISP <= (parmdate) and CHECKS.ID\_PRVD\_ORG= PROVIDER\_ORG.ID\_PRVD\_ORG and WS-VOUCHER-NO = CHECKS.id\_vchr\_no and CHECKS.CD\_CNTY = The County Code indicated in the Control Card.

#### Step 3: For Payment table records, update with voucher number and determine the payment types and amounts

Select [ID\_PMNT, ID\_PAYEE, ID\_PRSN, DT\_PMNT\_BEGIN,  
 DT\_PMNT\_END, AM\_UNITS, CD\_SERVICE, ID\_VCHR\_NO, AM\_BASIC,

AM\_SUPPL, AM\_EXCPT, AM\_ADMIN, AM\_RQST] from Payment table  
where  
PAYMENT.ID\_CHCK=CHECKS.ID\_CHCK  
AND  
ID\_VCHR\_NO= VOUCHER\_NUMBER.ID\_VCHR\_NO\_CRNT (as selected in  
Step 1)

For each payment row do the following:

If PAYMENT.AM\_BASIC <> NULL Then

IFC\_PAYMENT-TYPE='01'

IFC\_SIGN='+'

IFC\_AMOUNT=PAYMENT.AM\_BASIC

Create a new interface record; set the interface variables as described in

Step 4

If PAYMENT.AM\_SUPPL <> NULL Then

IFC\_PAYMENT-TYPE='02'

IFC\_SIGN='+'

IFC\_AMOUNT=PAYMENT.AM\_SUPPL

Create a new interface record; set the interface variables as described in

Step 4

If PAYMENT.AM\_EXCPT <> NULL Then

IFC\_PAYMENT-TYPE='03'

IFC\_SIGN='+'

IFC\_AMOUNT=PAYMENT.AM\_EXCPT

Create a new interface record; set the interface variables as described in

Step 4

If PAYMENT.AM\_ADMIN <> NULL Then

IFC\_PAYMENT-TYPE='04'

IFC\_SIGN='+'

IFC\_AMOUNT=PAYMENT.AM\_ADMIN

Create a new interface record; set the interface variables as described in

Step 4

If PAYMENT.AM\_RQST <> AM\_BASIC + AM\_SUPPL+AM\_EXCPT  
+ AM\_ADMIN Then

IFC\_PAYMENT-TYPE='04'

IFC\_SIGN='+'

IFC\_AMOUNT=PAYMENT.AM\_RQST

Create a new interface record; set the interface variables as described in

Step 4

Step 4: For Payment table records, determine the interface record variables

IFC\_PAYMENT\_START\_DATE=DT\_PMNT\_BEGIN

IFC\_VOUCHER\_NUMBER=ID\_VCHR\_NO  
IFC\_VOUCHER\_DATE= current date as indicated in the control card  
IFC\_CHILD\_IDENTIFIER=ID\_PRSN  
IFC\_PROVIDER\_ID=ID\_PRVD\_ORG

Determine the name of the payee:

Select TX\_PAYEE from CHECKS where  
CHECKS.ID\_CHK=PAYMENT.ID\_CHK  
IFC\_PAYEE\_NAME= CHECKS.TX\_PAYEE

Determine the name of the child:

Select [NM\_FRST, NM\_LST, MDL\_INIT, NM\_SFX] from PERSON table  
WHERE PERSON.ID\_PRSN=PAYMENT.ID\_PRSN

IFC\_CHILD\_LAST\_NAME= NM\_LST  
IFC\_CHILD\_FIRST\_NAME=NM\_FRST  
IFC\_CHILD\_MIDDLE\_INIT= NM\_MDL\_INTL  
IFC\_CHILD\_SUFFIX\_NAME= NM\_SFX

Determine the mailing address for the payee:

Select [AD\_STRT\_NBR, AD\_STRT\_NME, AD\_APT, AD\_LN\_2, AD\_LN\_3,  
TX\_TOWN, CD\_STATE, CD\_ZIP] from ADDRESS table  
where ADDRESS.ID\_ADRSS\_GRP=ID\_PAYEE and  
ADDRESS.CD\_GRP = 5 (Provider Address Group) and  
ADDRESS.CD\_GRP\_TYPE = 2 (Mailing Address) and  
DT\_EFCT\_START <= Current Date and  
DT\_EFCT\_START is the most recent effective start date

If no row is selected, then

Select [AD\_STRT\_NBR, AD\_STRT\_NME, AD\_APT, AD\_LN\_2, AD\_LN\_3,  
TX\_TOWN, CD\_STATE, CD\_ZIP] from ADDRESS table  
where ADDRESS.ID\_ADRSS\_GRP=ID\_PAYEE and  
ADDRESS.CD\_GRP = 5 (Provider Address Group) and  
ADDRESS.CD\_GRP\_TYPE = 1 (Physical Address) and  
DT\_EFCT\_START <= Current Date and  
DT\_EFCT\_START is the most recent effective start date

IFC\_MAIL\_FIRST\_STREET\_ADDR='ADDRESS.AD\_STRT\_NBR'&  
'ADDRESS.AD\_STRT\_NME'& 'ADDRESS.AD\_APT'  
IFC\_MAIL\_SECOND\_STREET\_ADDR=ADDRESS.AD\_LN\_3  
IFC\_MAIL\_IN\_CARE\_OF\_NAME=ADDRESS.AD\_LN\_2  
IFC\_MAIL\_CITY\_NAME=ADDRESS.TX\_TOWN  
IFC\_MAIL\_STATE\_NAME=ADDRESS.CD\_STATE  
IFC\_MAIL\_ZIP\_CODE= five leftmost characters in ADDRESS.CD\_ZIP  
IFC\_MAIL\_ZIP\_CODE\_PLUS\_4= four rightmost characters in  
ADDRESS.CD\_ZIP

IFC\_REM\_FIRST\_STREET\_ADDR= IFC\_MAIL\_FIRST\_STREET\_ADDR  
 IFC\_REM\_SECOND\_STREET\_ADDR=  
 IFC\_MAIL\_SECOND\_STREET\_ADDR IFC\_REM\_IN\_CARE\_OF\_NAME=  
 IFC\_MAIL\_IN\_CARE\_OF\_NAME IFC\_REM\_CITY\_NAME=  
 IFC\_MAIL\_CITY\_NAME  
 IFC\_REM\_STATE\_NAME= IFC\_MAIL\_STATE\_NAME  
 IFC\_REM\_ZIP\_CODE= IFC\_MAIL\_ZIP\_CODE  
 IFC\_REM\_ZIP\_CODE\_PLUS\_4= IFC\_MAIL\_ZIP\_CODE\_PLUS\_4

Determine the number of days of service:

For Payment Records:

Select FL\_CCI from SERVICE TYPE table where  
 SERVICE\_TYPE.CD\_SRVC=PAYMENT.CD\_SRVC

If FL\_CCI= 'N' then

IFC\_NUMBER\_OF\_DAYS= PAYMENT.DT\_PMNT\_END –  
 PAYMENT.DT\_PMNT\_BEGIN +1

If SERVICE\_TYPE.FL\_CCI= 'Y' then

IFC\_NUMBER\_OF\_DAYS= PAYMENT.AM\_UNITS

For Payment Adjustment Records:

IFC\_NUMBER\_OF\_DAYS= 2 spaces

Determine the service description:

IFC\_SERVICE\_DESCRIPTION= SERVICE\_TYPE.TX\_SRVC\_MED where  
 SERVICE\_TYPE.CD\_SRVC= PAYMENT.CD\_SRVC

Determine the court number:

IFC\_SERVICE\_DESCRIPTION= LEGAL\_ACTION.ID\_COURT\_NUM where  
 LEGAL\_\_ACTN.ID\_CASE= PAYMENT.ID\_CASE and  
 LEGAL\_\_ACTN.ID\_PRSN= PAYMENT.ID\_PRSN and  
 LEGAL\_\_ACTN.ID\_LGL\_ACTION= code value for 'Child Support' and  
 LEGAL\_\_ACTN.TS\_CR is the most recent

Step 5: For Payment Adjustment table records, update with voucher number and determine the interface record variables

Select [ID\_PMNT, ID\_PAYEE, ID\_PRSN, DT\_PMNT\_BEGIN,  
 DT\_PMNT\_END, AM\_UNITS, CD\_SERVICE, VCHR\_NO, AM\_RQST] from  
 Payment Adjustment table where  
 PAYMENT\_ADJUSTMENT.ID\_CHCK=CHECKS.ID\_CHCK  
 AND

ID\_VCHR\_NO= VOUCHER\_NUMBER.ID\_VCHR\_NO\_CRNT (as selected in  
 Step 1)

For each payment adjustment row do the following:

IFC\_PAYMENT-TYPE='07'

IFC\_SIGN='-'

IFC\_AMOUNT=PAYMENT\_ADJUSTMENT.AM\_RQST

IFC\_SERVICE\_DESCRIPTION= 'Overpayment Adjustment'

Create a new interface record; set the interface variables as described in Step 4. In Step 4, replace references to PAYMENT table with PAYMENT\_ADJUSTMENT table.

Step 6: Determine the direct deposit indicator

If CC-PAYMENT-METHOD = 'C', then IFC\_DIRECT\_DEPOSIT\_INDICATOR='N'

If CC-PAYMENT-METHOD = 'E', then IFC\_DIRECT\_DEPOSIT\_INDICATOR='Y'

Step 7: Determine County

Select PAYMENT.CD\_CNTY\_NEW or PAYMENT\_ADJUST.CD\_CNTY = to the County code entered in the parameter card.

Step 8: Increment the current voucher number by one

Select ID\_VCHR\_NO\_CRNT from VOUCHER\_NUMBER table where  
[VOUCHER\_NUMBER.DT\_FSCL\_YR = This Year as indicated by the current date on the control card] and [VOUCHER\_NUMBER.CD\_CNTY = The County code as indicated on the control card]

ID\_VCHR\_NO\_CRNT= ID\_VCHR\_NO\_CRNT+1

Step 9: Statewide Processing (Performed only for cd cnty <> 40 or 76)

IFC\_PAYMENT\_ID = PAYMENT.id\_pmnt

IFC\_EPISODE = PAYMENT.id\_epsd

IFC\_RPT\_CAT = PAYMENT.cd\_rptg\_cat

IFC\_COUNTY\_PERSON\_ID = COUNTY\_PERSON\_CROSS\_REF.id\_cnty\_prsn

where COUNTY\_PERSON\_CROSS\_REF.id\_prsn = PAYMENT.id\_prsn

IFC\_COUNTY\_CASE\_ID = COUNT\_CASE\_CROSS\_REF.id\_cnty\_case where  
COUNT\_CASE\_CROSS\_REF.id\_case = PAYMENT.id\_case

IFC\_COUNTY\_PRVD\_ID =

COUNT\_PROVIDER\_CROSS\_REF.id\_cnty\_prvd\_org where

COUNTY\_PROVIDER\_CROSS\_REF.id\_prvd\_org = PAYMENT.id\_prvd\_org

IFC\_COUNTY\_PAYEE\_ID =

COUNTY\_PROVIDER\_CROSS\_REF.id\_cnty\_prvd\_org where

COUNTY\_PROVIDER\_CROSS\_REF.id\_prvd\_org = PAYMENT.id\_payee

IFC\_CD\_SRVC = PAYMENT.cd\_srvc

IFC\_TARGET\_POP = EPISODE.cd\_target\_grp where EPISODE.id\_epsd = PAYMENT.id\_epsd (Note: one time payment do not have id\_epsd populated)

IFC\_SPC = SERVICE\_TYPE.cd\_spc where SERVICE\_TYPE.cd\_srvc = PAYMENT.cd\_srvc

#### Step 10: Account Numbers

Each payment is associated with a reporting category that will cross reference to an account number in the county system. The account number cross reference will be maintain by the county outside of WiSACWIS. (Example: Reporting Category 8 = Kinship Account Number). To retrieve the Reporting Category that is associated with a payment, the following logic applies: PAYMENT.cd\_rptg\_cat = IFC\_REPORTING\_CATEGORY.

#### General Notes:

In this batch program the County would not have to use the logic for IFC\_FUND, IFC\_DEPARTMENT, IFC\_ACCOUNT\_NUMBER because these fields are used in State check processing. These fields in the layout above have been marked Not Applicable.

Check Data Elements

WiSACWIS Mapping	Type	County Database Field Mapping	Type
IFC_PROVIDER_ID	Char(10)		
IFC_PAYEE_ID	Char(10)		
IFC_PAYEE_NAME	Char(30)		
IFC_FINANCIAL_INST_NAME	Char(32) Spaces		
IFC_DIRECT_DEPOSIT_INDICATOR	Char(1)		
IFC_ACCOUNT_NUMBER	Char(10) Spaces	N/A	N/A
IFC_CHILD_IDENTIFIER	Char(14)		
IFC_CHILD_LAST_NAME	Char(25)**		
IFC_CHILD_FIRST_NAME	Char(15)		
IFC_CHILD_MIDDLE_INIT	Char(1)		
IFC_CHILD_SUFFIX_NAME	Char(3)**		
IFC_MAIL_FIRST_STREET_ADDRESS	Char(40)**		
IFC_MAIL_SECOND_STREET_ADDRESS	Char(30)**		
IFC_MIAL_IN_CARE_OF_NAME	Char(30)*		
IFC_MAIL_CITY_NAME	Char(22)*		
IFC_MAIL_STATE_NAME	Char(2)		
IFC_MAIL_ZIP_CODE	Char(5)		
IFC_MAIL_ZIP_CODE_PLUS_4	Char(4)		
IFC_MAIL_FOREIGN_ADDRESS	Char(15) Spaces		
IFC_REM_FIRST_STREET_ADDRESS	Char(40)**		
IFC_REM_SECOND_STREET_ADDRESS	Char(30)**		
IFC_REM_IN_CARE_OF_NAME	Char(30)*		



IFC_REM_CITY_NAME	Char(22)*		
IFC_REM_STATE_NAME	Char(2)		
IFC_REM_ZIP_CODE	Char(5)		
IFC_REM_ZIP_CODE_PLUS_4	Char(4)		
IFC_REM_FOREIGN_ADDRESS	Char(15) Spaces		
IFC_PAYMENT_TYPE	Char(2)		
IFC_PAYMENT_START_DATE	Char(10)		
IFC_NUMBER_OF_DAYS	Char(3)		
IFC_SIGN	Char(1) Values = '+'(positive ) '-'(negative)		
IFC_AMOUNT	Number(7,2) ***		
IFC_VOUCHER_NUMBER	Char(5)		
IFC_VOUCHER_TYPE_CODE	Char(2) Value = 'IM'		
IFC_VOUCHER_DATE	Char(10)		
IFC_FUND	Char(2) Value = '05'	N/A	N/A
IFC_DEPARTMENT	Char(3) Value='435'	N/A	N/A
IFC_SERVICE_DESCRIPTION	Char(40)		
IFC_COURT_NUMBER	Char(8)		
IFC_COUNTY_CODE	Char(2)		
IFC_COUNTY_PERSON_ID	Char(20)		
IFC_COUNTY_CASE_ID	Char(20)		
IFC_COUNTY_PRVD_ID	Char(20)		
IFC_RPT_CAT	Char(5)		
IFC_EPISODE-ID	Char(14)		
IFC_PAYMENT_ID	Char(14)		
IFC_COUNTY_PAYEE_ID	Char(20)		
IFC_CD_SRVC	Char(9)		
IFC_TARGET_POP	Char(5)		

IFC_SPC	Char(5)		
FILLER	Char(40)		

### 3.2.3 Electronic Funds Transfer

Electronic Funds Transfers (EFT) is available through WiSACWIS. WiSACWIS can generate an NACHA standard EFT file, should a provider be established for electronic deposits. However, the County will be responsible for establishing a connection a bank and to NACHA to transmit EFT transactions.

### 3.3 Receiving Check Data - County to WiSACWIS

#### 3.3.1 Extract file created by County

Once a County has cut check, the County is responsible to return Check Numbers. The following flat file layout is the standard that will be used to receive this data. The data in this flat file will be updated to WiSACWIS. This link must be completed in order to meet Federal requirements before Federal claiming may be performed.

Check Extract Record	Type
PP-VOUCHER-NUMBER	Pic X(5)
PP-VOUCHER-TYPE-CODE	Pic X(2)
PP-VOUCHER-DATE	Pic X(10)
PP-PAYEE-ID	PIC X(10)
PP-CHECK-NUMBER	PIC X(8)
PP-CHECK-DATE	PIC X(10)

- PP-VOUCHER-NUMBER, must match the current the current voucher number for this batch of checks. This is transmitted to the County via the extra file, or it can be found the with WiSACWIS database extract.
- PP-VOUCHER-TYPE-CODE should be set equal to the County's numeric code.
- PP-PAYEE-ID is the provider's id number, as it appears in the Check Write extract file (IFC\_PAYEE\_ID), or it can be found in the PAYMENT table, PAYMENT.id\_payee.
- PP-CHECK-NUMBER is the number of the check issued by the County to this provider for this voucher batch.
- PP-CHECK-DATE is the date the check was issued by the County system.

The county must create and return this check file to WiSACWIS. The county can do this either by creating a batch program that generates this file (Option C), or by manually entering the check numbers into Check Number Recording window (Option D). The Check Number Recording window is discussed below.

### 3.3.2 Check Number Recording Window

Check Number Recording

Voucher Number:  Provider ID:

OK Search Cancel Help

Provider Name	Provider ID	Payee	ID Payee	Date Created	Voucher No	Amount
Perry Manor	20191	Perry Manor	20191	03/27/2002	500	\$750.00

Check Number Recording

Voucher Number:  Provider ID:

OK Search Cancel Help

Provider Name	ID Payee	Date Created	Voucher No	Amount	Check No	Check Dt
Manor	20191	03/27/2002	500	\$750.00	<input type="text"/>	00/00/0000

#### Window Overview

The Check Number Recording window is used to enter Check Number and Check Date, after a check is "In Process." Check are search by either Provider ID or Voucher Number. The window is used by both manual and interface counties. Once the Check Number and Check Date are received the status of check changes to "Outstanding." Checks that are "Outstanding" are incorporated into the Reimbursement process (See Topic Paper *FM04a: Reimbursement*).

#### Window Information

<b>Fields</b>	Provider Name:	Name of the provider to whom this check was issued; data will be retrieved PROVIDER_ORG.nm_prvd_1st, nm_prvd_frst where PROVIDER_ORG.id_prvd_org = CHECKS.id_prvd_org; System derived, not user editable.
	Provider ID:	Unique ID of the provider to whom this check was issued; data will be retrieved CHECKS.id_prvd_org; System derived, not user editable.
	Payee Name:	Name of the person to whom the check was; written CHECKS.tx_payee; System derived, not user editable.
	Payee ID:	Unique ID of the person to whom the check was issued; data will be retrieved from PAYMENT.id_payee where CHECKS.id_chck = PAYMENT.id_chck; System derived, not user editable.
	Date Created.:	The date the check was generated; data will be retrieved from CHECKS.ts_cr; System derived, not user editable.
	Voucher Number:	The voucher number associated with this check run; data will be retrieved from PAYMENT.id_vchr_no; System derived, not user editable.
	Amount:	Total dollar amount for this check; data will be retrieved from CHECKS.am_chck; System derived, not user editable.
	Check Number:	The check number associated with this check; data will be saved to CHECKS.id_chck_nmbr; User editable.
	Check Date:	The date this check was issued; data will be saved to CHECKS.dt_chck; User editable.
<b>Buttons</b>	OK	Standard Save Processing
	Search	Standard Search Processing (See Background Processing 1.2.5.3)
	Cancel	Standard Cancel Processing
	Help	Accesses the System Help and Policy Common Application function

## Background Processing

Search is available both on voucher and provider id and will retrieve only those row with the same County ID that matches users County ID. This will select all checks that are in process (CHECKS.cd\_chck\_disp = I) for that voucher number or provider id.

When they open the window and search again, then those rows with Check Number (id\_chck\_nmbr) not null will be grayed out and only where Check Number is null will be editable.

## Save Processing

Once saved, only rows with Check Number (id\_chk\_nmbr) populated will be save to database with Check Date (dt\_chk). If no check number, then no data will be saved to the database row with that id\_chk.

Select [ID\_CHK\_NMBR, DT\_CHK, ID\_CHK] from PAYMENT table where  
 PAYMENT.ID\_VCHR\_NO= VOUCHER-NUMBER (window buffer) and  
 PAYMENT.ID\_PAYEE= PAYEE-ID (window buffer)

Update each PAYMENT table record:

PAYMENT.ID\_CHK\_NMBR = CHECK-NUMBER from window  
 PAYMENT.DT\_CHK = CHECK-DATE from window  
 PAYMENT.TS\_UP= current date  
 PAYMENT.ID\_UP= ID of user

Select [ID\_CHK\_NMBR, DT\_CHK, ID\_CHK] from PAYMENT\_ADJUSTMENT  
 table where PAYMENT\_ADJUSTMENT.ID\_VCHR\_NO= VOUCHER-NUMBER  
 (window buffer) and PAYMENT\_ADJUSTMENT.ID\_PAYEE= PAYEE-ID (window  
 buffer)

Update each PAYMENT ADJUST table record:

PAYMENT\_ADJUST.ID\_CHK\_NMBR = PP-CHECK-NUMBER  
 PAYMENT\_ADJUST.DT\_CHK= PP-CHECK-DATE  
 PAYMENT\_ADJUST.TS\_UP= current date  
 PAYMENT\_ADJUST.ID\_UP= User ID

Update CHECKS table record associated with the Payments and Payment Adjustments.  
 (PAYMENT.ID\_CHK=CHECKS.ID\_CHK) or

(PAYMENT\_ADJUST.ID\_CHK=CHECKS.ID\_CHK)

Only one check row needs to be updated for all payment and payment adjustment table records that have the same voucher number and provider id.

CHECKS.ID\_CHK\_NMBR = CHECK-NUMBER (window buffer)  
 CHECKS.DT\_CHK\_DATE = CHECK-DATE (window buffer)  
 CHECKS.CD\_CHK\_DISP = 'O'  
 CHECKS.DT\_DISP = current date  
 CHECKS.TS\_UP= current date  
 CHECKS.ID\_UP= User ID

## CRUD Matrix

TABLE	CRUD
Checks	R,U
Payment	R,U
Payment Adjustment	R,U



### 3.4 Payment Processing

The *FM01: Process Payments* topic supports the following key activities:

- Preparation and authorization of one-time payment requests for expenditures, made on behalf of children in care, for goods or services (e.g., clothing);
- Viewing of the monthly payment requests (generated by the batch processes described in Section 1.4) for ongoing care and support costs (e.g., foster care);
- Documentation of checks issued in the field for expenditures made on an emergency basis;
- Recording of overpayments made to providers;
- Maintenance of account numbers to be associated with payments; and
- Maintenance of voucher numbers to be associated with check runs.

The Payment Request window processing allows the worker to link case participant and service information to the dollar amount and provider of the goods or services. The window is used as a record of payment and service provision for paid services and allows the worker to see the details of the service provision such as the type of service, begin date, end date, and the number of units of service. Additionally, this window can be used to record overpayments by entering a (-) total amount. Recoupment of overpayments, once they are posted in WiSACWIS, is described in *FM02b: Overpayment Adjustment* topic.

The Maintain Voucher Numbers window allows the users to enter the block of voucher numbers -assigned by County fiscal managers- to be used in check runs. The financial batch programs described in *FM02: Issue/Reconcile Checks* topic read the most current voucher number to be used and then increments this number by one after it has been used. Thus, the next time the batch process is triggered, it retrieves the most current number again.

#### 9.4.1 Calculate Ongoing Batch

The batch processes described in this topic allow WiSACWIS to generate recurring payments for ongoing services such as foster care, kinship care or adoption assistance. The Calculate Ongoing Amounts batch process derives placement and rate information from the system to generate monthly payments, based upon per diem rates, for foster care, kinship care, and other ongoing services. WiSACWIS calculates ongoing amounts based upon daily rates, where payment is made if the child is in care for a full day or partial day. This process calculates monthly payment amounts based on established service type rates, provider-specific rates or child-specific rates. Should the County negotiate a provider-specific rate adjustment or change an ongoing service rate with retroactive applicability, this batch process can calculate retroactive adjustments due providers based on service provision during the period covered. Workers may view the payments generated by this process through the Payment Request window.



The following are the key points of the Calculate Ongoing Amount batch process:

- WiSACWIS calculates ongoing amounts based upon either monthly rates or daily rates.
- Payments are made if the child is in care for a full day even if child is placed for only a partial day.
- Payments are prorated for partial month placements, or payments can be paid for full month with no prorating.
- Individual payments do not span beyond a single calendar month. Multiple payments will be generated for each month if a placement is backed.
- On a monthly basis this program calculates ongoing payment amounts by gathering placement episode and service rate information and generating pre-approved payments.
- For each child in an out-of-home-care or in-home-care placement for which ongoing payment is made, the service begin and end dates stored on the Episode Table provide the basis for calculation of the payment amount on a length-of-service basis.
- In the event that a placement has existed for some time, but payments have not been created, this batch program will create a series of payments for each month that a payment should have been made.

For example, if during the June run, it was determined that Placement XYZ began on January 1, but has not been paid, 6 payments will be created for Placement XYZ.

#### Parent Agency

- If a parent agency is associated with a provider the admin amount always goes to parent agency. (Note: Override this rule on out of home/in-home placement window). Two payment are generated. One payment for admin, one payment for the remaining amount.
- If a parent agency is “Not-For-Profit,” the entire sum goes to the parent agency.

#### Split Payment

- If a monthly payment amount needs to be split between the provider of the service and another provider, Calculate Ongoing Amounts batch program reads the payment split information as recorded by the worker on *SM10a: Out of Home Placements* Payment Split window.
- This includes the split method of percentage or fixed, and the name of the provider that the payment will be split with.
- The batch program generates two approved payment requests, one for each of the providers. The payment amounts reflect the percentage or the fixed amount as stored on the EPISODE table.

### Three Runs

- The Advance (A) run type generates approved payment requests for those services that are specified as 'paid in advance' on the Maintain Service Rate and Type window. These are service "to-be" provided in the following month.
- The rest of the non-CCI paid service types are processed by the Initial (I) run. These are for service that occurred in the past month.
- The Retroactive (R) is used to calculate retroactive payments due to changes in rates which are placed in effect for month which has already been processed.

#### 3.4.2 Episode Driven Batch

The Create Episode Driven Pending Payments batch program is currently used to create payments for Child Caring Institution (CCI) and Group Home placements. It creates a pending payment request record for each child in the facility. The users can view the payment request records – pre-filled with child, provider, and service information- created by the batch process and enter the number of days the child was actually in the CCI facility. Upon final approval of this payment request, it becomes ready to be included in the next check run.

The following are the key points of the Episode Driven batch process:

- Process produces a zero dollar payment each month
- Workers enter the number of units.
  - Units multiplied by Provider Specific rate for this service
  - OR
  - Units multiplied by Service Specific rate for this service
- Each payment will need to be individually approved
- This approval will be defaulted to work's supervisor, but can be rerouted to any worker
- If a parent agency is established, this payment will go to the parent agency if "Not-For-Profit"
- If a parent agency is established, this payment will not go to the parent agency if "For-Profit"

### Drawbacks

- Units must be entered and payment approved every month, or else the payment will not go out
- No prorating for partial periods
- No overpayments for backdated placements
- Admin, Basic, Supplemental and Exceptional amounts are not calculated with system generated payment
- Admin, Basic, Supplemental and Exceptional amounts cannot be entered on payment request window
- Admin amount entered on Out of Home placement window does not go to Parent agency, so a separate one-time payment would have to be made to the Parent agency

### 3.4.3 One Time Payments

- Can be used to create ongoing payments
- Can be used for emergency payments
- Can be used for one-time payment items, such as clothing
- Invoice number and date can be associated with this one-time payment

### 3.4.4 Overpayment Adjustment

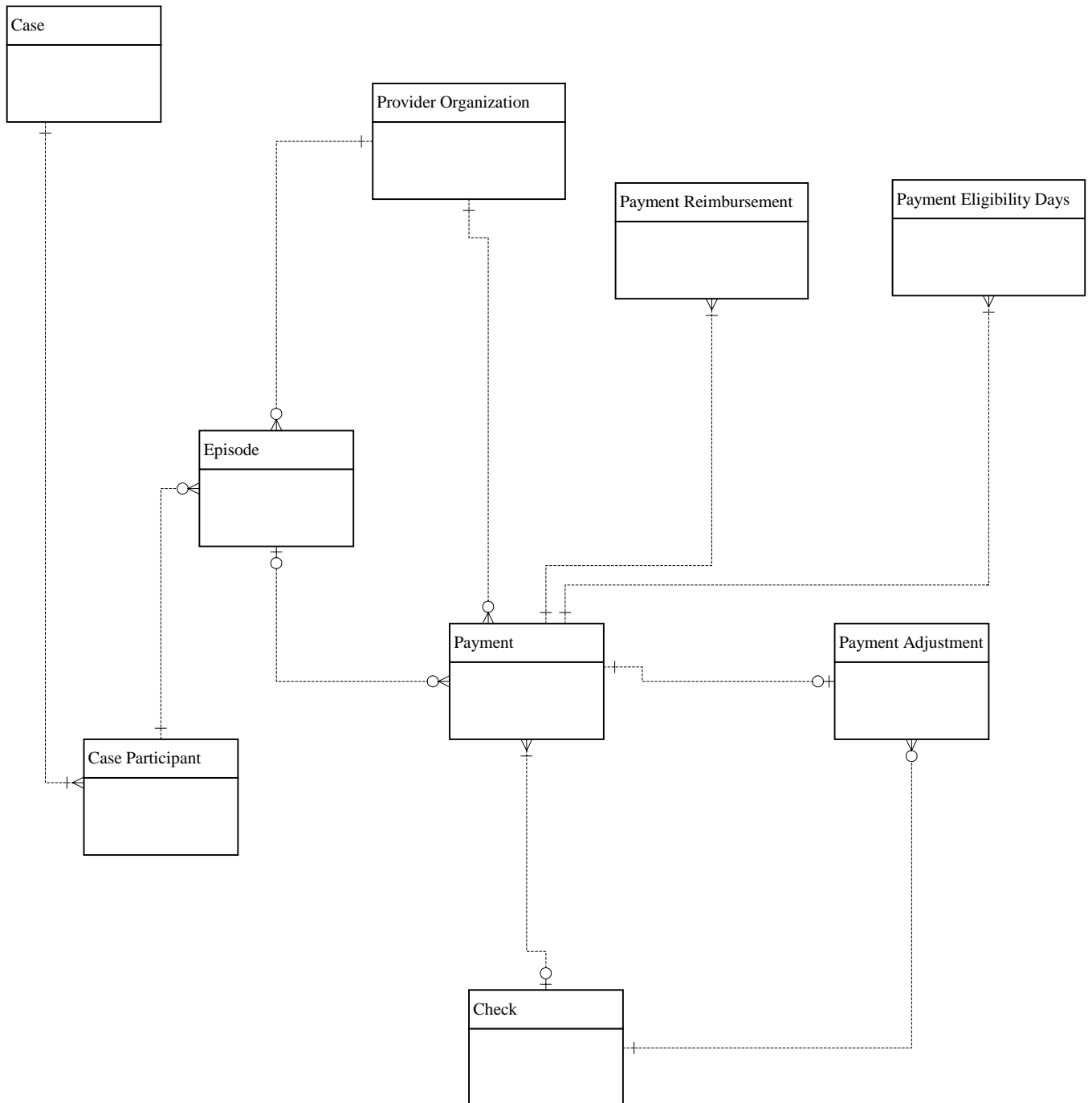
*FM02b: Overpayment Adjustment* design paper covers the functionality that allows users to view outstanding overpayments to a provider and manually adjust or correct these overpayments if necessary. Additionally, the batch program included in this topic gives the capability to reduce future payments that will be made to a provider based on a repayment schedule that is negotiated between the provider and the worker. This constitutes the automatic overpayment adjustment process and the user does not need to record manual adjustments to existing overpayments. The worker can also choose to report the outstanding overpayments to the County Collections system instead of using a repayment schedule. In addition, the *FM01: Payment Request* window is used to indicate that an overpayment is written off. The selection whether to report the providers' overpayments to the State Collections system or reduce their future payments will be indicated by the users through the *PM02a: Home Provider* and *PM02b: Private Provider* windows for each provider.

System generated Overpayment Adjustments are automatically included as part of a check for that provider. This reduces the amount of the outgoing payment.

The worker can review the outstanding overpayments and the previous overpayment adjustments to a provider by accessing the Create Provider Work window from the menu bar and then selecting *Subject: Payment, Item: Overpayment Adjustment*, and the appropriate *Provider*. A worker can only modify those overpayments and adjustments that were created within their County. Highlighting an overpayment entry will display any previous adjustments associated with the overpayment. Double-clicking on the overpayment entry will launch the Overpayment Adjustment window providing the worker the opportunity to review the overpayment before making a manual adjustment. The fields on this window will be disabled except for the Adjustment Amount and Description fields. The original overpayment amount will be displayed and the worker may enter the new adjustment amount. The amount entered must be a positive amount thereby decreasing the original overpayment amount.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Episode	EPISODE
Provider Organization	PROVIDER_ORG
Payment	PAYMENT
Check	CHECKS
Payment Reimbursement	PAYMENT_REIMBURSEMENT
Payment Eligible Days	PAYMENT_ELIG
Payment Adjustment	PAYMENT_ADJUST

## Payment Data Model



### 3.5 Check Processing

The *Issue/Reconcile Checks* topic covers those activities related to the issuance of checks as payments to providers for the provision of services to children and adults under County care. Checks are issued to providers for care and support activities such as foster care, adoption care, transportation, clothing allowances and other expenditures allowed by County policy.

This topic also incorporates the activities required to periodically reconcile a single care and support checking account used for making these payments. In the case where checks are issued from contingent funds accounts, check reconciliation will be performed manually and WiSACWIS will not post those these payments the Check Write file. These checks are consider emergency spending were a check was written immediately and recording in WiSACWIS at a later time. The County may retrieve these amounts from the database extract file in order to update the general ledger.

The automated check creation activities described in this topic occur after the payments from the payments request process described in *FM01: Process Payments* topic have been created and authorized. Once authorized, payment requests are eligible to be disbursed in the next appropriate check issuance cycle. A process has been established to validate the amounts of the payments and checks before they are generated. Prior to running the Calculate Ongoing batch program, the County may run the Pre Payment Verification Report. This can be reviewed in Appendix E.

When a payment cycle is initiated, WiSACWIS is instructed to select the payments that are eligible for disbursement during that cycle. The payment types include One-Time/On-Request care and support payments, and ongoing care and support payments. Payments are selected based on the following selection criteria:

- By Service Types (current criterion);
- Payment Request Date (to select Payment records that have a Payment Request Date that is prior to or equal to the run date);
- Payment Types (One-Time, Ongoing, Pending Episode-Driven)

The Create Pending Checks batch program selects payments eligible for a check run and generates pending checks entries. The pending check entries will contain all the information necessary for the actual check, except the actual check number and date. These entries are placed on the Checks Table.

Once the Pending Check entries are created, the check information can be reviewed using the Review Pending Checks window as well as the Pending Checks Payee Listing report. After the pending check review is complete, the batch program WiSACWIS to DOA-Check Write File Extract generates a file that includes the details of the payments for the specified disbursement cycle. The County may use this file to print the provider checks and the associated check stubs. Alternatively, the County may use the extract database file to read and update their check write system.

After every check run, the County will provide WiSACWIS with check numbers and date. Two options are available to the County for reporting these values. The first option is to manually record the check date on the Check Number Recording window. Alternatively, the County may create a check write file that will be read by the WiSACWIS Check Write batch program. The Check Number Recording window and the Check Write batch program, both update the Check, Payment and Payment Adjust tables with the check number and date, and changes the disposition of any In Process checks to Outstanding.

Changes to the status of a check can be made on the Check Disposition window. WiSACWIS allows changes to be made to the status of a check after it has been printed, but not yet cleared the County Treasury. Check dispositions include cancel check and do not pay payments; cancel check and reschedule payments; stop check and do not pay payments; redeposited, expired. Additionally, users can manually clear any check.

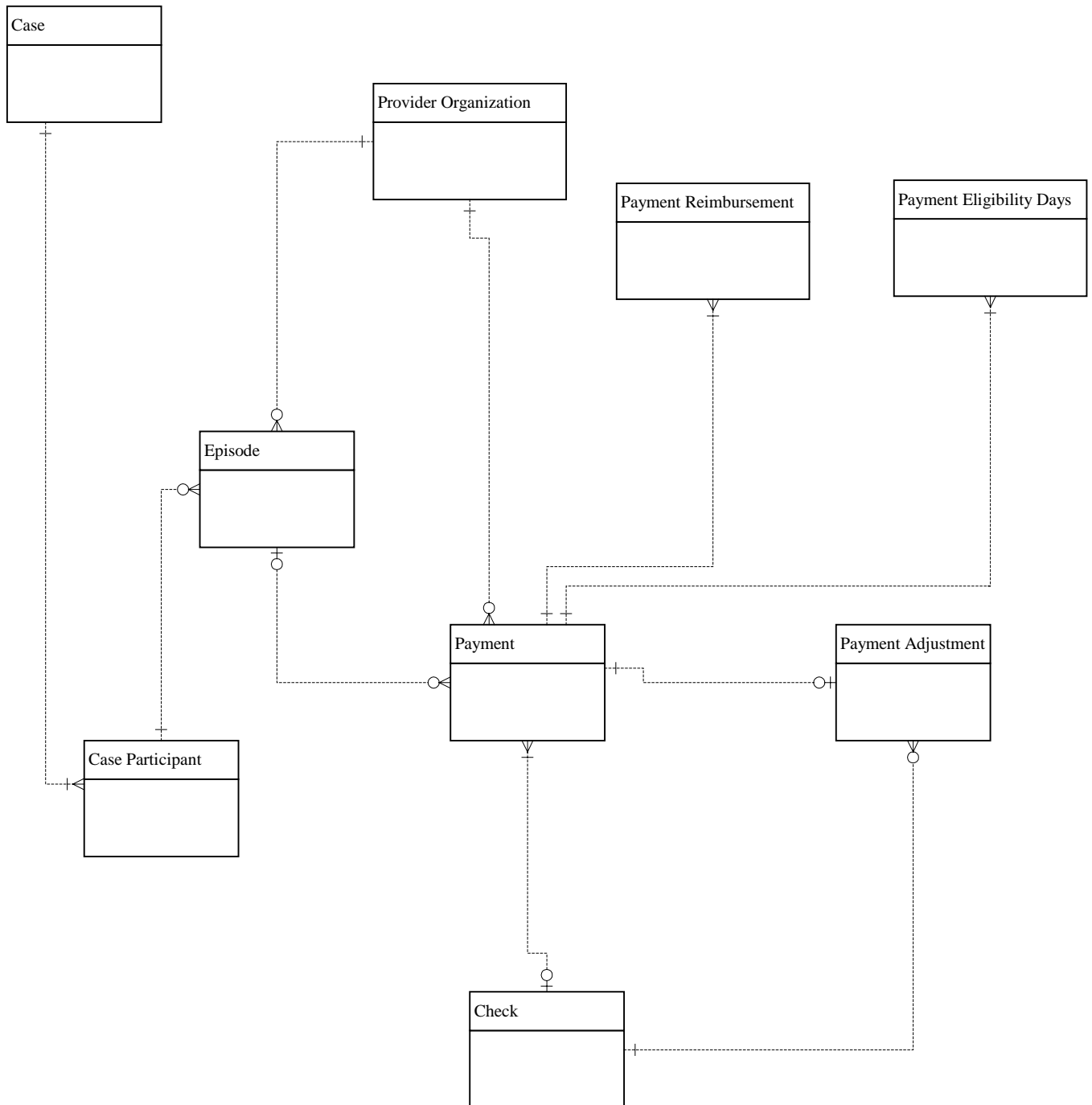
The Voucher Worksheet provides a summary of all accounting information for a given County, or for the State. The WiSACWIS to FMS-Expenditures batch generates these entries, based on accounting data stored within WiSACWIS, and is then used to display the data in report format.

The Create 1099 Report process totals payments for Providers who are both 1099 eligible and offer 1099 eligible services. This information is provided to the Bureau of Information Systems or any other entity responsible for determining 1099 eligibility.

Finally, the Manual Checks window allows authorized County workers to capture information in WiSACWIS regarding a check which has been issued outside the normal payroll cycle. County will have the ability to issue a manual check to support a provider's request.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Episode	EPISODE
Provider Organization	PROVIDER_ORG
Payment	PAYMENT
Check	CHECKS
Payment Reimbursement	PAYMENT_REIMBURSEMENT
Payment Eligible Days	PAYMENT_ELIG
Payment Adjustment	PAYMENT_ADJUST

## Payment Data Model





### 3.6 Trust Accounts

*FM07: Trust Account* topic paper covers the creation and maintenance of a Trust Account on behalf of children wards of State. Only the Trust Account Manager will have access to maintain benefit money on behalf of these children. Each child may only have two trust accounts opened at a single time. The Dedicated Trust Account will hold SSI money that is received in a single payment in excess of six months. The General Trust Account will hold all other benefits. These two accounts will be established as separate interest bearing bank accounts. The break down of each child's portion, including all withdrawals and deposits, will be maintained in the Ledger tab of the Trust Account window.

Maximum balance levels can be established for trust accounts. Using the Maximum Balance window the Trust Account Manager can establish a maximum balance for Federal Financial Participation (FFP) and Non-FFP children. When the child's balance reaches a specified percentage of this balance, a tickler will be sent to the trust account manager to initiate a spend-down. Once the trust account manager has confirmed that money can be spent, they will contact the primary worker.

Interest earned will be maintained through the Interest window of this module. The interest amount earned in each bank account can be entered in this window. A spread interest batch will pick up this amount and prorate each child's portion. This will indicate a deposit entry on the ledger record.

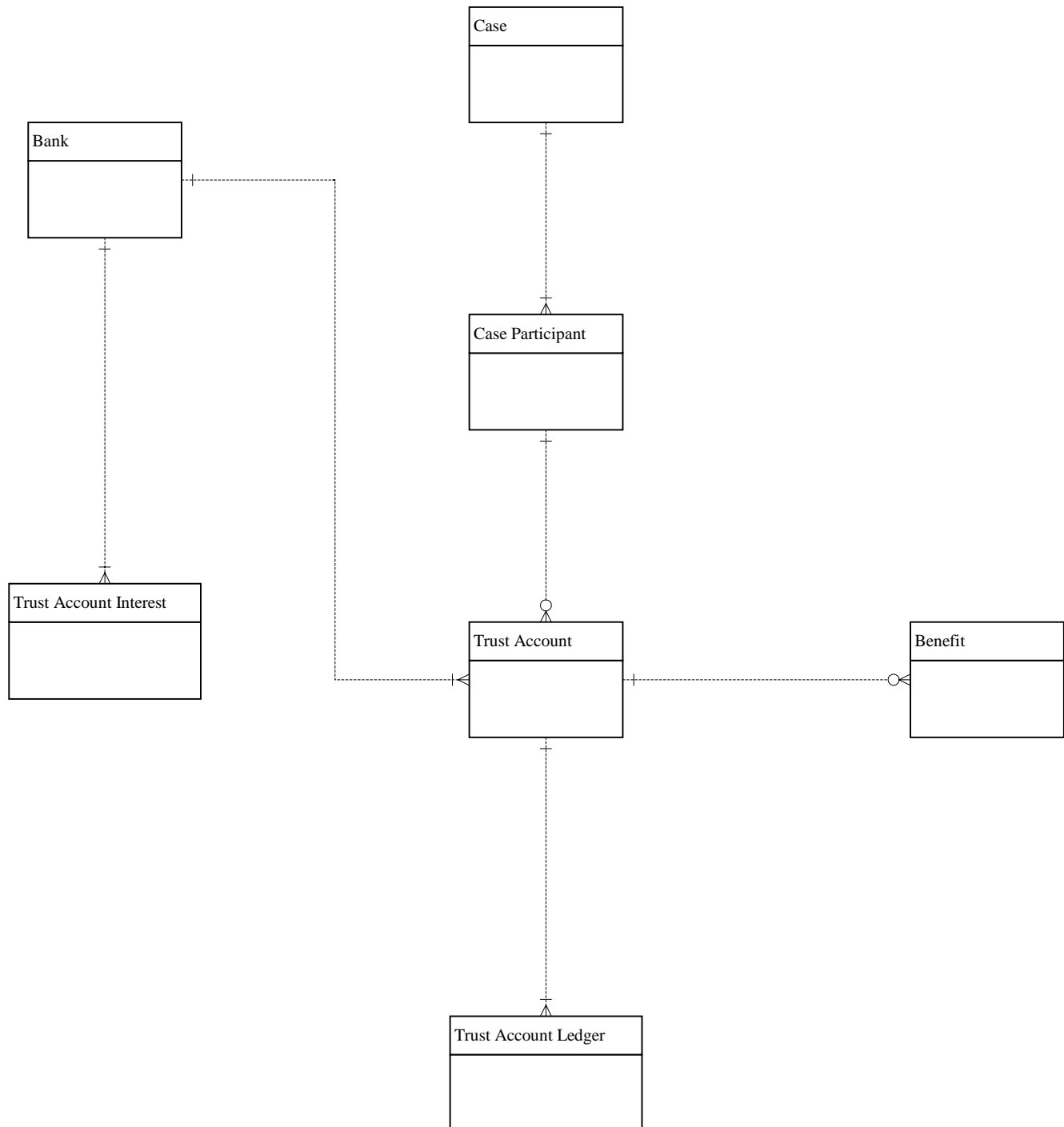
Caseworkers and other assignees of the Case will have the only view access to the Trust Account window. This module is integrated with the Trust Account Draw Down batch (See *FM04a Reimbursement*), which uses benefit money towards the cost of ongoing care for a child. The Trust Account Draw Down batch will withdraw available money from the General Account. The Trust Account Manager will have the ability to indicate which benefits are available for ongoing care. The Trust Account Manager must also write a check to the State once the batch has been determined how much money is reimbursable to the State for that period.

Child Support money is also available to the State to reimburse the cost of ongoing care. The referral process to the KIDS (Kids Information Data System) of Department of Workforce Development is described in this paper. Two batch programs send referrals and financial information to the KIDS System. The KIDS system sends back both child support amounts for each child and any changes in demographic information on the child or parents.

If a County chooses to establish a Dedicated and General account at Firststar bank, than EFT transaction are automatically posted to WiSACWIS. An interface with Firststar Bank will download and post to the trust account ledger all EFT transactions except Child Support deposits. The deposits that are recorded automatically are transactions from SSI-State, SSI-Federal, SSA-Survivor's, SSA-Disability, VA and Railroad Benefits.

Data Model Description	Table Name
Case	CASE
Case Participant	CASE_PART
Bank	BANK
Trust Account	TRUST_ACCOUNT
Trust Account Interest	TRUST_ACCOUNT_INTEREST
Benefit	BENEFIT
Trust Account Ledger	TRUST_ACCOUNT_LEDGER

## Trust Account Data Model







## Appendix A

### Data Mapping Report

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
1	ID_PRSN	9	Numeric	Unique id of the person.					M	M		
2	CD_MFONE_LSTN M	20	Text	Funky (phonetic search codes) character representation of first name; generated from the funky software.						M		
3	CD_MFONE_FRSTN M	20	Text	Funky character representation of first name; generated from the funky software.						M		
4	CD_STAT	5	Text	Person status. See Reference Code Table CODE DESC STATIC; ID SDESC GRP = PRSNSTAT. Codes=(A)ctive, (D)elete, (I)nactive, (M)erge.					M	M		
	<b>Code Values:</b>		A	Active								
			D	Delete								
			I	Inactive								
			M	Merge								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			P	Pending								
6	NM_LST	20	Text	Person s last name					M	M		
7	NM_UPR_LST	20	Text	Upper case representation of NM LST, used in individual search and retrieval.						M		
8	NM_FRST	15	Text	Person s first name					M	M		
9	NM_UPR_FRST	15	Text	Upper case representation of NM FST; used in individual search and retrieval.						M		
10	ID_CR	9	Numeric	Unique ID of person who created the row.						M		
11	TS_CR	19	Date/Time - MM/DD/YYYY Y:HH:MM:SS	Date and time the row was created.						M		
12	ID_UP	9	Numeric	Unique ID of the person who last updated the row.						M		
13	TS_UP	19	Date/Time - MM/DD/YYYY Y:HH:MM:SS	Date and time that the row was last updated.						M		
14	CD_RACE	5	Numeric	Code indicating a person s primary race. See ref table CODE DESC; group PRSNRACE.					O	O		
	<b>Code Values:</b>		00001	White								
			00002	Black/African American								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00004	Asian								
			00005	American Indian/Alaskan Native								
			00006	Unable to Determine								
			00007	Native Hawaiian/Other Pacific Islander								
15	CD_HSPNC	5	Text	Determines if the person is Hispanic or not. Yes, No, or Undetermined					O	O		
	<b>Code Values:</b>		00001	Yes								
			00002	No								
			00003	Unable to Determine								
16	CD_CMBN_ETHN	5	Numeric	PERSON combined ethnic, racial and national origin. See Reference Code Table CODE DESC; group CMBNETHN					O	O		
	<b>Code Values:</b>		00001	Native American								
			00002	Asian Indian								
			00003	Caucasian								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00004	Hispanic/Latino								
			00005	Cambodian								
			00006	Chinese								
			00007	Filipino								
			00008	Japanese								
			00009	Korean								
			00010	Laotian								
			00011	Thai								
			00012	Vietnamese								
			00013	Other Southeast Asian								
			00014	Cuban								
			00015	Puerto Rican								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00016	Mexican, Chicano, Mexican American								
			00017	Other Spanish/Hispanic								
			00018	African American/Black								
			00019	Other								
			00020	Arabic								
			00021	Eastern European								
			00022	Hmong								
			00023	Russian								
			00024	German								
			00025	Italian								
			00064	Not Hispanic/Latino								
17	CD_GNDR	5	Text	Gender code. "F"- Female, "M"- Male, "U"- Unknown					O	O		

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
	<b>Code Values:</b>		F	Female								
			M	Male								
			U	Unknown								
18	CD_CTZN	5	Numeric	Citizen status code of a person. (0) Yes, (1) No					O	O		
	<b>Code Values:</b>		00001	U.S. Citizen								
			00002	Legal Immigrant								
			00003	Illegal Immigrant								
			00004	Not Known								
19	CD_STATE_RSDNT	5	Text	(Y) Yes, (N) No, (U) Undetermined					O	O		
20	CD_CNTRY	5	Numeric	Country code. See Reference Code Table CODE DESC, ID GROUP = COUNTRY					O	O		
	<b>Code Values:</b>		00001	United States								
			00002	Canada								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00003	Vietnam								
			00004	Korea								
			00005	Portugal								
			00006	Poland								
			00007	Italy								
			00008	Cambodia								
			00009	Other								
			00010	Afghanistan								
			00011	Albania								
			00012	Algeria								
			00013	American Samoa								
			00014	Andorra								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00015	Angola								
			00016	Argentina								
			00017	Armenia								
			00018	Aruba								
			00019	Australia								
			00020	Austria								
			00021	Bahamas								
			00022	Bangladesh								
			00023	Belarus								
			00024	Belgium								
			00025	Belize								
			00026	Bermuda								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00027	Bhutan								
			00028	Bolivia								
			00029	Bosnia								
			00030	Brazil								
			00031	British Virgin Islands								
			00032	Bulgaria								
			00033	Burma								
			00034	Central African Republic								
			00035	Chile								
			00036	China								
			00037	Colombia								
			00038	Congo								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00039	Costa Rica								
			00040	Croatia								
			00041	Cuba								
			00042	Czech Republic								
			00043	Denmark								
			00044	Dominican Republic								
			00045	Ecuador								
			00046	Egypt								
			00047	El Salvador								
			00048	Equitorial Guinea								
			00049	Ethiopia								
			00050	Finland								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00051	France								
			00052	French Guiana								
			00053	Gambia								
			00054	Georgia								
			00055	Germany								
			00056	Ghana								
			00057	Greece								
			00058	Grenada								
			00059	Guam								
			00060	Guatemala								
			00061	Guinea								
			00062	Guyana								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00063	Haiti								
			00064	Honduras								
			00065	Hong Kong								
			00066	Hungary								
			00067	Iceland								
			00068	India								
			00069	Indonesia								
			00070	Iran								
			00071	Iraq								
			00072	Ireland								
			00073	Israel								
			00074	Jamaica								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00076	Jordan								
			00077	Kenya								
			00078	Kuwait								
			00079	Laos								
			00080	Latvia								
			00081	Lebanon								
			00082	Liberia								
			00083	Libya								
			00084	Liechtenstein								
			00085	Lithuania								
			00086	Lusembourg								
			00087	Macedonia								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00088	Madagascar								
			00089	Malaysia								
			00090	Malta								
			00091	Martinique								
			00092	Mexico								
			00093	Mongolia								
			00094	Morocco								
			00095	Mozambique								
			00096	Netherlands								
			00098	Nicaragua								
			00099	Nigeria								
			00100	Norway								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00101	Pakistan								
			00102	Panama								
			00103	Paraguay								
			00104	Peru								
			00105	Philippines								
			00106	Puerto Rico								
			00107	Romania								
			00108	Russia								
			00109	Rwanda								
			00110	Saudi Arabia								
			00111	Serbia								
			00112	Singapore								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00113	Slovakia								
			00114	Slovenia								
			00115	Somalia								
			00116	South Africa								
			00117	Spain								
			00118	Sri Lanka								
			00119	Sudan								
			00120	Swaziland								
			00121	Sweden								
			00122	Switzerland								
			00123	Taiwan								
			00124	Thailand								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00125	Trinidad								
			00126	Turkey								
			00127	U.S. Virgin Islands								
			00128	Uganda								
			00129	Ukraine								
			00130	Uruguay								
			00131	Venezuela								
			00133	Yugoslavia								
			00134	Zaire								
			00135	Zambia								
			00136	Zimbabwe								
21	CD_LNG_PRFR	5	Numeric	Code indicating a person s language preference. See Reference Code Table CODE DESC; group LANGUAGE.					O	O		

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
	<b>Code Values:</b>		00001	Cambodian								
			00002	Chinese								
			00003	Farsi								
			00004	French								
			00005	German								
			00006	Haitian								
			00007	Hungarian								
			00008	Iranian								
			00009	Italian								
			00010	Laotian								
			00011	Latvian								
			00012	Lithuanian								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00013	Polish								
			00014	Portuguese								
			00015	Russian								
			00016	Spanish								
			00017	Vietnamese								
			00018	American Sign Language								
			00019	English								
			00020	Spanish/English Bilingual								
			00022	Arabic								
			00023	Greek								
			00024	Japanese								
			00026	Korean								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00028	Filipino								
			00030	Thai								
			00031	Albanian								
			00032	Kosovarian								
			00034	Hmong								
			00035	Other Indo European								
			00036	Other								
			00099	Unknown								
22	CD_TRNSL	5	Text	Code indicating the need for a translator. "Y" or "N"					O	O		
	<b>Code Values:</b>		N	No								
			U	Undetermined								
			Y	Yes								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
23	CD_INDN	5	Numeric	American Indian tribe code. See Reference Code Table CODE DESC; group INDNTRIB.					O	O		
	<b>Code Values:</b>		00001	Chippewa Bad River Band								
			00002	Lac Courte Oreilles Band								
			00003	Lac Du Flambeau Band								
			00004	St. Croix								
			00005	Sokoagon (Mole Lake)								
			00006	Potawatomi								
			00007	Menominee								
			00008	Stockbridge Munsee								
			00009	Winnebago (Ho Chunk)								
			00010	Red Cliff								
			00011	Oneida								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
			00012	Other Native American								
			00013	Unknown								
24	CD_MRTL_STAT	5	Numeric	Code indicating marital status of the person. Options: 1=Married couple, 2=Unmarried Couple, 3=Single Female, 4=Single male, 5=Unable to Determine					O	O		
	<b>Code Values:</b>		00001	Single								
			00002	Married								
			00003	Divorced								
			00004	Widowed								
			00005	Separated								
			00006	Unable To Determine								
			00007	Not Known								
			00008	Unmarried Couple								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
28	CD_RLGN	5	Numeric	Code indicating religious preference of person. See Reference Code Table CODE DESC; group RELIGION.					O	O		
	<b>Code Values:</b>		00001	None								
			00002	Catholic								
			00003	Unaffiliated								
			00004	Jewish								
			00005	Protestant								
			00006	Muslim								
			00007	Buddhist								
			00008	Hindu								
			00009	Atheist								
			00010	Mormon								
			00011	Baptist								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00012	Episcopal								
			00013	Jehovah s Witness								
			00014	Lutheran								
			00015	Mennonite								
			00016	Native American Other								
			00017	Orthodox Eastern								
			00018	Presbyterian								
			00019	Quaker (Friends)								
			00020	Scientology								
			00021	Seventh Day Adventist								
			00022	Sikh								
			00023	Unitarian								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
			00024	Other								
			00025	Unknown								
			00026	Anglican								
			00027	Methodist								
			00028	Amish								
34	DT_ARCHV	19	Date/Time - MM/DD/YYYY Y:HH:MM:SS	Date the record was archived.						O		
35	DT_BRTH	19	Date/Time - MM/DD/YYYY Y:HH:MM:SS	Participant s date of birth.					O	O		
36	DT_DTH	19	Date/Time - MM/DD/YYYY Y:HH:MM:SS	PERSON date of death.					O	O		
37	CD_ARCHV	5	Text	Code indicating whether record was archived. A = Archived, R = Retrieved, N = Neither. See reference code CODE DESC STATIC, ID SDEC GRP = PRSNARCH.						O		
	<b>Code Values:</b>		A	Archived								
			R	Retrieved								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
38	NM_MDL_INTL	1	Text	Person s middle initial.					O	O		
39	NM_PRFX	4	Text	Example = Mr., Mrs., Dr., etc..					O	O		
40	NM_SFX	4	Text	Example = III, Jr., Sr., etc....					O	O		
41	ID_SSN	9	Text	Person s Social Security Number.					O	O		
42	ID_PRSN_MRG	9	Numeric	Will replace Person Merge table.						O		
43	ID_CENSUS_NBR	9	Numeric	An identification number for a person who belongs to an Indian Tribe.					O	O		
45	TX_BRTH_PLC	20	Text	Birthplace, city & state, where the person was born.					O	O		
47	CD_WRKR	5	Text	Code indicating if the person is a CYFD worker; values are A - active worker, I - inactive worker, null - not applicable. See Reference Code Table CODE DESC STATIC, ID GROUP = WRKRSTAT.					O	O		
	<b>Code Values:</b>		A	Active								
			I	Inactive								
48	TX_HEIGHT	3	Text	Person s height					O			

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
51	CD_RACE_THREE	6	Text	Code indicating a person s race. See ref table CODE DESC; group PRSNRACE.					O	O		
	<b>Code Values:</b>		00001	White								
			00002	Black/African American								
			00004	Asian								
			00005	American Indian/Alaskan Native								
			00006	Unable to Determine								
			00007	Native Hawaiian/Other Pacific Islander								
52	CD_RACE_TWO	6	Text	Code indicating a person s race. See ref table CODE DESC; group PRSNRACE.					O	O		
	<b>Code Values:</b>		00001	White								
			00002	Black/African American								
			00004	Asian								
			00005	American Indian/Alaskan Native								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
			00006	Unable to Determine								
			00007	Native Hawaiian/Other Pacific Islander								
53	FL_PRN_ACV_DT_MLT	1	Text - Y, N, or blank	Flag indicating if the person is on Active Duty in the Armed Services. (Y) (N)					O			
54	FL_PRN_LG_DPN_AV_DT	1	Text - Y, N, or blank	Flag indicating if the person is a Legal Dependent of an Individual on Active Duty in the Armed Services. (Y) (N)					O			
55	FL_PRSN_MLTRTD	1	Text - Y, N, or blank	Flag indicating if the person was a Maltreater. (Y) (N)					O	O		
56	ID_DAD	9	Numeric	The person ID of the case participant s father.					O	O		
57	ID_GRND1	9	Numeric	The person ID of the case participant s first gaurdian.					O	O		
58	ID_GRND2	9	Numeric	The person ID of the case participant s second gaurdian.					O	O		
59	ID_MOM	9	Numeric	The person ID of the case participant s mother.					O	O		
60	CD_FTHRS_CRNT_STS	15	Text	Code indicating a father s current status. See ref table CODE DESC; group MCURSTAT.					O	O		
	<b>Code Values:</b>		00001	Married								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00002	Divorced								
			00003	Separated								
			00004	Never Married								
			00005	Deceased								
			00006	Widowed								
			00007	Other								
			00008	Unknown								
61	CD_GRD_CMPLTD	6	Text	Child s highest grade level completed. Dropdown listbox. One, Two, Three, Four, Five, Six, Seven, Eight, Nine, Ten, Eleven, Twelve, Kinder, PreSch, NGSpEd (Non Grade Specific education), None					O	O		
	<b>Code Values:</b>		00001	One								
			00002	Two								
			00003	Three								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00004	Four								
			00005	Five								
			00006	Six								
			00007	Seven								
			00008	Eight								
			00009	Nine								
			00010	Ten								
			00011	Eleven								
			00012	Twelve								
62	CD_MTHRS_CRNT_ STS	15	Text	Code indicating a mother s current status. See ref table CODE DESC; group MCURSTAT.					O	O		
	<b>Code Values:</b>		00001	Married								
			00002	Divorced								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00003	Separated								
			00004	Never Married								
			00005	Deceased								
			00006	Widowed								
			00007	Other								
			00008	Unknown								
63	CD_PRNTL_RLTNS HP	15	Text	Current relationship of parents to each other. See ref table CODE DESC; group PRNREL.					O	O		
	<b>Code Values:</b>		00001	Married								
			00002	Divorced								
			00003	Separated								
			00004	Never Married								
			00005	Unknown								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
			00006	Other								
64	FL_CRNTY_ENRLD_SCH	1	Text - Y, N, or blank	Child is currently enrolled in school. (Check box on= yes off=no)					O	O		
65	FL_FTHR_TPR	1	Text - Y, N, or blank	Father has TPR(terminated parental rights). Checkbox yes= on no= off.					O	O		
66	FL_MTHR_TPR	1	Text - Y, N, or blank	Mother has TPR(terminated parental rights). Checkbox yes= on no= off.					O	O		
67	FL_RCV_DSBTY_PYMNT	1	Text - Y, N, or blank	Child recieves disability payment----Checkbox on= yes off= no					O	O		
68	FL_RCV_KNSHP_PYMNT	1	Text - Y, N, or blank	Teen parent s child receives a disability payment-- Checkbox on= yes off= no					O	O		
69	FL_RESIDES_HM_HR	1	Text - Y, N, or blank	Teen parent s child resides with him or her. Yes/No checkbox.					O	O		
70	FL_TEEN_PRNT	1	Text - Y, N, or blank	Child is a teen parent---Checkbox on= yes off= no					O	O		
71	ID_CARES_PIN	9	Text	CARES pin number					O	O		
72	NUM_AM_CHD_UND_INC	7	Numeric	Monthly amount of any child unearned income.----\$###,###.00					O	O		
73	TX_SCHL_DSTRCT	7	Numeric	Child s school district number.----####					O	O		
74	FL_ABANDONED	1	Text - Y, N, or blank						O	O		

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Conv	Case	CIA	Fin
75	FL_ADPT	1	Text - Y, N, or blank	Flag indicating whether child was ever adopted.					O	O		
76	QT_AGE_ADPT	7	Numeric	Unique id to identify the child's legal guardian.					O	O		
78	CD_INDN2	5	Numeric	American Indian tribe code. See Reference Code Table CODE DESC; group INDNTRIB.					O	O		
	<b>Code Values:</b>		00001	Chippewa Bad River Band								
			00002	Lac Courte Oreilles Band								
			00003	Lac Du Flambeau Band								
			00004	St. Croix								
			00005	Sokoagon (Mole Lake)								
			00006	Potawatomi								
			00007	Menominee								
			00008	Stockbridge Munsee								
			00009	Winnebago (Ho Chunk)								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00010	Red Cliff								
			00011	Oneida								
			00012	Other Native American								
			00013	Unknown								
79	ID_COMMIT	9	Numeric	The Commitment number assigned to the person						O		
80	CD_CNTY	5	Text	County code. See Reference Code Table CODE DESC FNCL; ID GROUP = COUNTY.					O	O		
	<b>Code Values:</b>		00001	Adams								
			00002	Ashland								
			00003	Barron								
			00004	Bayfield								
			00005	Brown								
			00006	Buffalo								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00007	Burnett								
			00008	Calumet								
			00009	Chippewa								
			00010	Clark								
			00011	Columbia								
			00012	Crawford								
			00013	Dane								
			00014	Dodge								
			00015	Door								
			00016	Douglas								
			00017	Dunn								
			00018	Eau Claire								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00019	Florence								
			00020	Fond du Lac								
			00021	Forest								
			00022	Grant								
			00023	Green								
			00024	Green Lake								
			00025	Iowa								
			00026	Iron								
			00027	Jackson								
			00028	Jefferson								
			00029	Juneau								
			00030	Kenosha								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00031	Kewaunee								
			00032	La Crosse								
			00033	Lafayette								
			00034	Langlade								
			00035	Lincoln								
			00036	Madeline								
			00037	Manitowoc								
			00038	Marathon								
			00039	Marinette								
			00040	Marquette								
			00041	Menominee								
			00042	Milwaukee								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00043	Monroe								
			00044	Oconto								
			00045	Oneida								
			00046	Out of Country								
			00047	Out of State								
			00048	Outagamie								
			00049	Ozaukee								
			00050	Pepin								
			00051	Pierce								
			00052	Polk								
			00053	Portage								
			00054	Price								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00055	Racine								
			00056	Richland								
			00057	Rock								
			00058	Rusk								
			00059	Saint Croix								
			00060	Sauk								
			00061	Sawyer								
			00062	Shawano								
			00063	Sheboygan								
			00064	Taylor								
			00065	Trempealeau								
			00066	Vernon								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00067	Vilas								
			00068	Walworth								
			00069	Washburn								
			00070	Washington								
			00071	Waukesha								
			00072	Waupaca								
			00073	Waushara								
			00074	Winnebago								
			00075	Wood								
81	CD_HSRS_CLIENT_ CHAR1	5	Numeric	Code indicating Client Characteristics. See Reference Code Table CODE DESC; group HSRSCCHAR.					O	O		
	<b>Code Values:</b>		00002	Mental Illness (excluding SPMI)								
			00003	Serious and Persistent Mental Illness								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00004	Alcohol Client								
			00005	Drug Client								
			00007	Blind/Visually Impaired								
			00008	Hearing Impaired								
			00009	Physically Disabled/Mobility Impaired								
			00010	Chronic Alcoholic								
			00012	Alcohol and Other Drug Client								
			00017	Intoxicated Driver								
			00019	Developmental Disability - Brain Trauma								
			00023	Developmental Disability- Cerebral Palsy								
			00025	Developmental Disability - Autism								
			00026	Developmental Disability - Mental Retard								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00027	Developmental Disability - Epilepsy								
			00028	Developmental Disability - Other or Unkn								
			00036	Other Handicap								
			00043	Migrant								
			00044	Refugee								
			00045	Cuban Haitian Entrant								
			00059	Unmarried Parent								
			00061	CHIPS - Abuse and Neglect								
			00062	CHIPS - Abuse								
			00063	CHIPS - Neglect								
			00064	Family Member of Abused/Neglected Child								
			00066	Delinquent								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00068	CHIPS - Other								
			00069	JIPS - Status Offender								
			00070	Family Member of Status Offender								
			00073	Family Member of Delinquent								
			00074	Family Member of CHIPS - Other								
			00085	Severe Health Impairments								
			00086	Severe Emotional Disturbance - Child/Ado								
			00099	None of the Above								
82	CD_HSRS_CLIENT_ CHAR2	5	Numeric	Code indicating Client Characteristics. See Reference Code Table CODE DESC; group HSRSCHAR.					O	O		
	<b>Code Values:</b>		00002	Mental Illness (excluding SPMI)								
			00003	Serious and Persistent Mental Illness								
			00004	Alcohol Client								



Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00005	Drug Client								
			00007	Blind/Visually Impaired								
			00008	Hearing Impaired								
			00009	Physically Disabled/Mobility Impaired								
			00010	Chronic Alcoholic								
			00012	Alcohol and Other Drug Client								
			00017	Intoxicated Driver								
			00019	Developmental Disability - Brain Trauma								
			00023	Developmental Disability- Cerebral Palsy								
			00025	Developmental Disability - Autism								
			00026	Developmental Disability - Mental Retard								
			00027	Developmental Disability - Epilepsy								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00028	Developmental Disability - Other or Unkn								
			00036	Other Handicap								
			00043	Migrant								
			00044	Refugee								
			00045	Cuban Haitian Entrant								
			00059	Unmarried Parent								
			00061	CHIPS - Abuse and Neglect								
			00062	CHIPS - Abuse								
			00063	CHIPS - Neglect								
			00064	Family Member of Abused/Neglected Child								
			00066	Delinquent								
			00068	CHIPS - Other								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00069	JIPS - Status Offender								
			00070	Family Member of Status Offender								
			00073	Family Member of Delinquent								
			00074	Family Member of CHIPS - Other								
			00085	Severe Health Impairments								
			00086	Severe Emotional Disturbance - Child/Ado								
			00099	None of the Above								
83	CD_HSRS_CLIENT_CHAR3	5	Numeric	Code indicating Client Characteristics. See Reference Code Table CODE DESC; group HSRSCHAR.					O	O		
	<b>Code Values:</b>		00002	Mental Illness (excluding SPMI)								
			00003	Serious and Persistent Mental Illness								
			00004	Alcohol Client								
			00005	Drug Client								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00007	Blind/Visually Impaired								
			00008	Hearing Impaired								
			00009	Physically Disabled/Mobility Impaired								
			00010	Chronic Alcoholic								
			00012	Alcohol and Other Drug Client								
			00017	Intoxicated Driver								
			00019	Developmental Disability - Brain Trauma								
			00023	Developmental Disability- Cerebral Palsy								
			00025	Developmental Disability - Autism								
			00026	Developmental Disability - Mental Retard								
			00027	Developmental Disability - Epilepsy								
			00028	Developmental Disability - Other or Unkn								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00036	Other Handicap								
			00043	Migrant								
			00044	Refugee								
			00045	Cuban Haitian Entrant								
			00059	Unmarried Parent								
			00061	CHIPS - Abuse and Neglect								
			00062	CHIPS - Abuse								
			00063	CHIPS - Neglect								
			00064	Family Member of Abused/Neglected Child								
			00066	Delinquent								
			00068	CHIPS - Other								
			00069	JIPS - Status Offender								

Seq	Field Name	Length	Data Type /Code Value	Field Desc /Code Desc	County Table	County Field	County Code Value	County Field Desc /County Code Desc	Con v	Case	CIA	Fin
			00070	Family Member of Status Offender								
			00073	Family Member of Delinquent								
			00074	Family Member of CHIPS - Other								
			00085	Severe Health Impairments								
			00086	Severe Emotional Disturbance - Child/Ado								
			00099	None of the Above								

## Appendix B

### *WiSACWIS Topics*

#### *Topic Name Description*

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CM01	Person Management
CM02	Worker Assignment
CM03	Checklist
CM04	Ticklers
CM05	Automated Messaging
CM06	Notes
CM07	Meetings
CM09	Security
CM10	Search
CM12	Office Automation
CM16	Archiving
CM17	Merge/Delete Person
CM18	Manage Worker
CM19	Approvals
CM20	Report Selection
FM01	Process Payments
FM02	Issue or Reconcile Checks
FM02B	Overpayment Adjustments
FM03	Eligibility
FM04A	Reimbursement
FM07	Trust Accounts
IN02	AFCARS HSRS
IN03	NCANDS

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PM01	Maintain Services
PM02A	Home Provider
PM02B	Private Provider
PM04A	Licensing Home Provider
PM06	Bed Reservations
PM07	Home Inquiry
PM08	Address Maintenance
PM10	Recruitment
SM01A	PS Report
SM01B	Services Intakes
SM03	Information and Referral
SM04A	Maintain Case
SM04B	Case Outliner
SM05	Case Closure
SM06A	Assessment
SM06B	Safety
SM07A	Education
SM07B	Forms
SM08	Document Plans
SM09	Court
SM10A	Out of Home Placements
SM10B	Adoption Referral
SM13A	Medical Mental Health and CPI
SM13B	Assets and Employment
SM15	Special Needs and Unmet Needs
SM16	Close Adoption Record and AS



## Appendix C

This displays the subject areas discussed in *Section 8.0 Case Management Interface* and *Section 9.0 Financial Interface*, and the WiSACWIS tables discussed within each subject area.

Subject Area	Table Name
Assessment	CASE
Assessment	CASE_PART
Assessment	CPS_REPORT
Assessment	DOC_NARRATIVE
Assessment	IA_NARRATIVE
Assessment	IA_PRIMARY
Assessment	IA_SCNDRY
Assessment	INVESTIGATION
Assessment	INVESTIGATION_CNTC
Assessment	LINK_PART
Assessment	NEEDS_AND_STRENGTHS
Assessment	RISK_ASSESSMENT
Assessment	SAFETY_ASSESSMENT
Case	ADDRESS
Case	ALLEGATION
Case	CASE
Case	CASE_CLOSURE
Case	CASE_OTHR_CNTCT
Case	CASE_PART
Case	PERSON
Case	PERSON_AKA

Subject Area	Table Name
Case Participant	ASSET
Case Participant	BCKGCHCK_RESULT
Case Participant	CASE
Case Participant	CASE_PART
Case Participant	CASE_PART_STAT
Case Participant	EDUCATION
Case Participant	EMPLOYMENT
Case Participant	LEA_HISTORY
Case Participant	MEDICAL_PROFILE
Case Participant	MENTAL_HEALTH_PROFILE
Case Participant	PAY_CLAIM_HISTORY
Case Participant	PERSON
Case Participant	PROVIDER_ORG
Case Participant	SCHOOL
CPS Intake	ALLEGATION
CPS Intake	CPS_REPORT
CPS Intake	INTAKE_PART
CPS Intake	PERSON
CPS Intake	PROVIDER_ORG
Legal	CASE
Legal	CASE_PART
Legal	COURT_DISP
Legal	LEGAL_ACTION
Legal	LEGAL_DOC
Legal	LINK_PART
Ongoing Case Management	CASE
Ongoing Case Management	CASE_EVAL
Ongoing Case Management	CASE_PART

Subject Area	Table Name
Ongoing Case Management	CASE_PLAN
Ongoing Case Management	CASE_PLAN_ITEM
Ongoing Case Management	CASE_PLAN_ITEM_DETAIL
Ongoing Case Management	FAMILY_ASSESSMENT
Ongoing Case Management	FAMILY_ASSESSMENT_DOMAINS
Ongoing Case Management	PRMNCY_PLAN
Ongoing Case Management	SAFETY_PLAN
Ongoing Case Management	SAFETY_PLAN_ITEM_DETAIL
Ongoing Case Management	SAFETY_PLAN_OH
Payment	CASE
Payment	CASE_PART
Payment	CHECKS
Payment	EPISODE
Payment	PAYMENT
Payment	PAYMENT_ADJUST
Payment	PAYMENT_ELIG_DAYS
Payment	PAYMENT_REIMBURSEMENT
Payment	PROVIDER_ORG
Placement	AGREE_AMEND
Placement	AGREE_AMEND_DTL
Placement	AGREEMENT
Placement	BED_RESERVATION
Placement	CASE
Placement	CASE_PART
Placement	EPISODE
Placement	LINK_PART
Placement	PLACEMENT_REQUEST
Placement	PROVIDER_ORG

Subject Area	Table Name
Placement	SPECIAL_NEEDS
Placement	UNMET_NEEDS
Provider	ADDRESS
Provider	HOME_INQUIRY
Provider	INTAKE_PART
Provider	LICENSE
Provider	LICENSE_ACTION
Provider	PROVIDER_ORG
Provider	PROVIDER_PART
Provider	PROVIDER_PART_STAT
Provider	PROVIDER_SERVICE
Provider	PRVD_SRVC_LCNS
Provider	PRVD_SRVC_RATE
Provider	SERVICE_RATE
Provider	SERVICE_TYPE
Reference Code	ALLEGATION_CD
Reference Code	ASSIGN_CATEGORY
Reference Code	CATEGORY_TYPE
Reference Code	CODE_DESC
Reference Code	CODE_DESC_FNCL
Reference Code	CODE_DESC_LRG
Reference Code	CODE_DESC_STATIC
Reference Code	CODE_GRP_DESC
Reference Code	JOB_CLASS
Reference Code	LOCATION
Services Intake	INTAKE_PART
Services Intake	PERSON
Services Intake	REFERRAL

Subject Area	Table Name
Trust Account	BANK
Trust Account	BENEFIT
Trust Account	CASE
Trust Account	CASE_PART
Trust Account	TRUST_ACCOUNT
Trust Account	TRUST_ACCOUNT_INTEREST
Trust Account	TRUST_ACCOUNT_LEDGER
Worker	APPROVAL
Worker	APPROVAL_HISTORY
Worker	ASSIGNMENT
Worker	PERSON
Worker	WORKER

## Appendix D

This displays all WiSACWIS interface tables, sorted by table name and matched to the appropriate subject area.

Table Name	Subject Area
ADDRESS	Case
ADDRESS	Provider
AGREE_AMEND	Placement
AGREE_AMEND_DTL	Placement
AGREEMENT	Placement
ALLEGATION	Case
ALLEGATION	CPS Intake
ALLEGATION_CD	Reference Code
APPROVAL	Worker
APPROVAL_HISTORY	Worker
ASSET	Case Participant
ASSIGN_CATEGORY	Reference Code
ASSIGNMENT	Worker
BANK	Trust Account
BCKGCHCK_RESULT	Case Participant
BED_RESERVATION	Placement
BENEFIT	Trust Account
CASE	Assessment
CASE	Case
CASE	Case Participant
CASE	Legal

Table Name	Subject Area
CASE	Ongoing Case Management
CASE	Payment
CASE	Placement
CASE	Trust Account
CASE_CLOSURE	Case
CASE_EVAL	Ongoing Case Management
CASE_OTHR_CNTCT	Case
CASE_PART	Assessment
CASE_PART	Case
CASE_PART	Case Participant
CASE_PART	Legal
CASE_PART	Ongoing Case Management
CASE_PART	Payment
CASE_PART	Placement
CASE_PART	Trust Account
CASE_PART_STAT	Case Participant
CASE_PLAN	Ongoing Case Management
CASE_PLAN_ITEM	Ongoing Case Management
CASE_PLAN_ITEM_DETAIL	Ongoing Case Management
CATEGORY_TYPE	Reference Code
CHECKS	Payment
CODE_DESC	Reference Code
CODE_DESC_FNCL	Reference Code
CODE_DESC_LRG	Reference Code
CODE_DESC_STATIC	Reference Code
CODE_GRP_DESC	Reference Code
COURT_DISP	Legal
CPS_REPORT	Assessment

Table Name	Subject Area
CPS_REPORT	CPS Intake
DOC_NARRATIVE	Assessment
EDUCATION	Case Participant
EMPLOYMENT	Case Participant
EPISODE	Payment
EPISODE	Placement
FAMILY_ASSESSMENT	Ongoing Case Management
FAMILY_ASSESSMENT_DOMAINS	Ongoing Case Management
HOME_INQUIRY	Provider
IA_NARRATIVE	Assessment
IA_PRIMARY	Assessment
IA_SCNDRY	Assessment
INTAKE_PART	CPS Intake
INTAKE_PART	Provider
INTAKE_PART	Services Intake
INVESTIGATION	Assessment
INVESTIGATION_CNTC	Assessment
JOB_CLASS	Reference Code
LEA_HISTORY	Case Participant
LEGAL_ACTION	Legal
LEGAL_DOC	Legal
LICENSE	Provider
LICENSE_ACTION	Provider
LINK_PART	Assessment
LINK_PART	Legal
LINK_PART	Placement
LOCATION	Reference Code
MEDICAL_PROFILE	Case Participant



Table Name	Subject Area
MENTAL_HEALTH_PROFILE	Case Participant
NEEDS_AND_STRENGTHS	Assessment
PAY_CLAIM_HISTORY	Case Participant
PAYMENT	Payment
PAYMENT_ADJUST	Payment
PAYMENT_ELIG_DAYS	Payment
PAYMENT_REIMBURSEMENT	Payment
PERSON	Case
PERSON	Case Participant
PERSON	CPS Intake
PERSON	Services Intake
PERSON	Worker
PERSON_AKA	Case
PLACEMENT_REQUEST	Placement
PRMNCY_PLAN	Ongoing Case Management
PROVIDER_ORG	Case Participant
PROVIDER_ORG	CPS Intake
PROVIDER_ORG	Payment
PROVIDER_ORG	Placement
PROVIDER_ORG	Provider
PROVIDER_PART	Provider
PROVIDER_PART_STAT	Provider
PROVIDER_SERVICE	Provider
PRVD_SRVC_LCNS	Provider
PRVD_SRVC_RATE	Provider
REFERRAL	Services Intake
RISK_ASSESSMENT	Assessment
SAFETY_ASSESSMENT	Assessment

Table Name	Subject Area
SAFETY_PLAN	Ongoing Case Management
SAFETY_PLAN_ITEM_DETAIL	Ongoing Case Management
SAFETY_PLAN_OH	Ongoing Case Management
SCHOOL	Case Participant
SERVICE_RATE	Provider
SERVICE_TYPE	Provider
SPECIAL_NEEDS	Placement
TRUST_ACCOUNT	Trust Account
TRUST_ACCOUNT_INTEREST	Trust Account
TRUST_ACCOUNT_LEDGER	Trust Account
UNMET_NEEDS	Placement
WORKER	Worker



## Appendix E

Run: MM/DD/YYYY

Wisconsin Dept. of Health and Family Services  
Division of Children and Family Services

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### Pre Payment Verification report

County: LaFayette

Case Worker: XXXXXXXXXX

#### Newly Opened Placements:

PAYEE/ CHILD/ SERVICE DESCRIPTION	PLACEMENT START	PLACEMENT END	BASIC AMOUNT	SUPP AMOUNT	EXCEPT AMOUNT	ADMIN AMOUNT	TOTAL AMOUNT
-----							
-----							
Jonathon Q. Jones 145 East Main Street Apt # 301 Darlington , WI 53707							
Smith, Susie, A. Foster Care - General 0-4	01/01/2001		\$299.00	\$36.00	\$0.00	\$0.00	\$335.00
Smith, Tommy, B. Foster Care - General 5-11	12/01/2000		\$329.00	\$0.00	\$0.00	\$0.00	\$329.00
Anderson, Samantha, G. Foster Care - General 12-14	07/01/2000	09/30/2001	\$375.00	\$0.00	\$150.00	\$0.00	\$525.00
	PAYEE TOTAL		\$1003.00	\$36.00	\$150.00	\$0.00	\$1189.00

XX  
 XXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXX  
 XXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX, XX XXXXXXXXXXX

XXXXXXXXXX, XXXXXXXXXXX, X. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXXXX, X. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXXXX, X.						

XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
PAYEE TOTAL		\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99

Run: MM/DD/YYYY

Wisconsin Dept. of Health and Family Services  
Division of Children and Family Services

Page: 9,999

**Pre Payment Verification report**

County: XXXXXXXXX  
Case Worker: XXXXXXXXX

**Ongoing Placements:**

PAYEE/ CHILD/ SERVICE DESCRIPTION	PLACEMENT START	PLACEMENT END	BASIC AMOUNT	SUPP AMOUNT	EXCEPT AMOUNT	ADMIN AMOUNT	TOTAL AMOUNT
-----							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX							
XXXXXX XXXXXXXXXXXXXXXXXXXX XXXX							
XXXXXXXXXXXX							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX, XX XXXXXXXXX							
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
PAYEE TOTAL			\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
XXXXXX XXXXXXXXXXXXXXXXXXXX XXXX  
XXXXXXXXXXXX  
XXXXXXXXXXXXXXXXXXXXXXXXXXXX, XX XXXXXXXXX

XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							

XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.								
XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
PAYEE TOTAL			\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99

Run: MM/DD/YYYY

Wisconsin Dept. of Health and Family Services  
Division of Children and Family Services

Page: 9,999

**Pre Payment Verification report**

County: XXXXXXXXX

Case Worker: XXXXXXXXX

**Newly Closed Placements:**

PAYEE/ CHILD/ SERVICE DESCRIPTION	PLACEMENT START	PLACEMENT END	BASIC AMOUNT	SUPP AMOUNT	EXCEPT AMOUNT	ADMIN AMOUNT	TOTAL AMOUNT
-----							
XX							
XXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXX							
XXXXXXXXXXXX							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX, XX XXXXXXXXX							
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
	PAYEE TOTAL		\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XX							
XXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXX							
XXXXXXXXXXXX							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX, XX XXXXXXXXX							
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
XXXXXXXXXX, XXXXXXXXX, X.							

XXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/YYYY	MM/DD/YYYY	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99
	PAYEE TOTAL		\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99	\$99,999.99